

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90051 007 ***150.00

DOCUMENT # L98005

1. Entity Name

CONDO RENTALS OF DAYTONA, INC.



Principal Place of Business

2410 S ATLANTIC AVE
DAYTONA BEACH SHORES FL 32118-5402

Mailing Address

2410 S ATLANTIC AVE
DAYTONA BEACH SHORES FL 32118-5402

2. Principal Place of Business

Same as above

3. Mailing Address

Same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Same as above

City & State

Same as above

Zip

32118

Country

Volusia

Zip

32118

Country

USA

4. FEI Number

59-3028849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CLOWER, DAVID MICHAEL
322 SILVER BCH AVE
DAYTONA BCH FL 32118

7. Name and Address of New Registered Agent

Name

Same as before

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE CLOWER, DAVID MICHAEL, P. A.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02/02/06

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete
NAME JONES, ANNA LOUISE
STREET ADDRESS 2410 S. ATLANTIC AVE.
CITY-ST-ZIP DAYTONA BEACH SHORES FL

TITLE VPD ☐ Delete
NAME HAACK, KAREN A
STREET ADDRESS 2410 S. ATLANTIC AVE.
CITY-ST-ZIP DAYTONA BEACH SHORES FL

TITLE GMD ☐ Delete
NAME JONES, KNOWLTON C JR
STREET ADDRESS 2410 S. ATLANTIC AVE
CITY-ST-ZIP DAYTONA BEACH SHORES FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment to this report with all other like employment.

SIGNATURE: Knowlton C. Jones, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/02/06

Date

386-255-2233

Daytime Phone #