

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90050 005 ****61.25

DOCUMENT # N00000001145

1. Entity Name

COMMUNITY RESOURCE CENTER OF DAYTONA BEACH, INC.

Principal Place of Business

412 NORTH FREDERICK AVE.
DAYTONA BCH FL 32114

Mailing Address

412 NORTH FREDERICK AVE.
DAYTONA BCH FL 32114

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 31-1720257

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCARLETT-GOLDEN, YVONNE
412 NORTH FREDERICK AVE.
DAYTONA BCH FL 32114

Name

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME SCARLETT-GOLDEN, YVONNE
STREET ADDRESS 412 NORTH FREDERICK AVE.
CITY-ST-ZIP DAYTONA BCH FL 32114

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

TITLE D ☐ Delete
NAME PHILLIPS, EUGENE
STREET ADDRESS 1347 CONTINENTAL DR.
CITY-ST-ZIP DAYTONA BCH FL 32114

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

TITLE D ☐ Delete
NAME SLATER, CYNTHIA
STREET ADDRESS 815 S. KOTLE CIR.
CITY-ST-ZIP DAYTONA BCH FL 32114

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

TITLE D ☒ Delete
NAME ROSSETTI, JUDITH
STREET ADDRESS 1435 JOHN ANDERSON DR.
CITY-ST-ZIP ORMOND BCH FL 32178

TITLE ☒ Change ☐ Addition
NAME D Lewis, Norma
STREET ADDRESS 221 Jefferson
CITY-ST-ZIP Daytona Beach, FL 32114

TITLE D ☐ Delete
NAME LEWIS, DOROTHY G
STREET ADDRESS 429 TARRAGONA WAY
CITY-ST-ZIP DAYTONA BEACH FL 32114

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

YVONNE SCARLETT-GOLDEN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 29 2002 386-248-1542
Date Daytime Phone #

CR2E037 (9/01)