

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006739

FILED
Apr 26, 2007
Secretary of State

Entity Name: DELAND ST JOHNS RIVER CHRISTMAS BOAT PARADE, INC.

Current Principal Place of Business:

425 E LANDSDOWNE AVE
ORANGE CITY, FL 327634903

New Principal Place of Business:

Current Mailing Address:

425 E LANDSDOWNE AVE
ORANGE CITY, FL 327634903

New Mailing Address:

FEI Number: 59-3697160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOYWOOD, ROGER
425 E LANDSDOWNE AVE
ORANGE CITY, FL 327634903 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRD () Delete
Name: WOYWOOD, ROGER A
Address: 425 E.LANSLOWNE AV
City-St-Zip: ORANGE CITY, FL 32763

Title: VPD () Delete
Name: SCHOPPERT, CINDY
Address: 3501 CORA; AV
City-St-Zip: DELAND, FL 32720

Title: SD () Delete
Name: MOORE, DIANE
Address: 2280 HONTOON RD
City-St-Zip: DELAND, FL 32720

Title: TD () Delete
Name: WOYWOOD, PATTY
Address: 425 E.LANSLOWNE AV
City-St-Zip: ORANGE CITY, FL 32763

Title: D () Delete
Name: SWYNTEK, ROLAND
Address: 2253 HONTOON RD
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: SWYNTEK, KAREN
Address: 2253 HONTOON RD
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER A. WOYWOOD

PRD

04/26/2007

Electronic Signature of Signing Officer or Director

Date