

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00131

FILED
Apr 22, 2004
Secretary of State

Entity Name: DAYTONA BEACH CHAPTER OF THE SOCIETY OF FINANCIAL SERVICE PROFESSIONALS, INC.

Current Principal Place of Business:

P.O. BOX 1144, N/A
ORMOND BEACH, FL 32175 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1144
ORMOND BEACH, FL 32175 US

New Mailing Address:

FEI Number: 59-2372737 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TUMBLESON, J. DOYLE
CITY CENTER EAST
150 S. PALMETTO AVENUE
DAYTONA BEACH, FL 32115 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: PD () Delete
Name: FISHER JACK,
Address: 770W GRANADA BLVD #20
City-St-Zip: ORMOND BEACH, FL 32174

Title: VPD () Delete
Name: CHARLES STEVENS,
Address: 2744 US 1 S
City-St-Zip: ST AUGUSTINE, FL 32086

Title: CD () Delete
Name: WATKINSON, ARLIE
Address: 444 SEABREEZE BLVD, #750
City-St-Zip: DAYTONA BEACH, FL 32118

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JACK FISHER

PD

04/22/2004

Electronic Signature of Signing Officer or Director

Date