2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007
Secretary of State

DOCUMENT# N05000002967

Entity Name: DAYTONA WHEELCHAIR SPORTS ASSOCIATION, INC.

Current Principal Place of Business:

1616 SHANGRI-LA DRIVE
DAYTONA BEACH, FL 32119

New Principal Place of Business:

Current Mailing Address:

1616 SHANGRI-LA DRIVE
DAYTONA BEACH, FL 32119

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BRUNS, JANE
1616 SHANGRI-LA DRIVE
DAYTONA BEACH, FL 32119 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:	D	( ) Delete
Name:	FARNUM, ANGUS A.	
Address:	8785 56TH ST. N.	
City-St-Zip:	PINELLAS PARK, FL 33782	
Title:	D	( ) Delete
Name:	SMITH, MARGARET	
Address:	5200 99TH TERRACE, APT.B	
City-St-Zip:	PINELLAS PARK, FL 33782	
Title:	D	( ) Delete
Name:	MATHIS, JAMES	
Address:	568 N. THOMPSON RD.	
City-St-Zip:	APOPKA, FL 32712	
Title:	P	( ) Delete
Name:	BRUNS, DONALD B.	
Address:	1616 SHANGRI-LA DRIVE	
City-St-Zip:	DAYTONA BEACH, FL 32119	
Title:	VP	( ) Delete
Name:	FARNUM, VICKI A.	
Address:	8785 56TH ST. N.	
City-St-Zip:	PINELLAS PARK, FL 33782	
Title:	ST	( ) Delete
Name:	BRUNS, JANE	
Address:	1616 SHANGRI-LA DRIVE	
City-St-Zip:	DAYTONA BEACH, FL 32119	

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
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 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: JANE BRUNS RA 03/21/2007

Electronic Signature of Signing Officer or Director — Date