

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 02, 2007
Secretary of State

DOCUMENT# N05000004301

Entity Name: THE DAYTONA BEACH COMMUNITY DEVELOPMENT CORPORATION OF FLORIDA, INC.**Current Principal Place of Business:**632 ORANGE AVE
DAYTONA BEACH, FL 32114**New Principal Place of Business:**449 S. MARTIN L. KING BLVD.
DAYTONA BEACH, FL 32114**Current Mailing Address:**632 ORANGE AVE
DAYTONA BEACH, FL 32114**New Mailing Address:**9142 ROYAL GATE DRIVE
WINDERMERE, FL 34786**FEI Number:** 20-2763990**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**WILLIAMS, JAMES O SR
632 ORANGE AVE
DAYTONA BEACH, FL 32114 US**Name and Address of New Registered Agent:**WILLIAMS, JAMES O SR
9142 ROYAL GATE DRIVE
WINDERMERE, FL 34786 US

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: _____

05/02/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: WILLIAMS, JAMES O SR
Address: 9142 ROYAL GATE DR
City-St-Zip: WINDERMERE, FL 34786

Title: DS () Delete
Name: HOLLOWAY, ADRIAN
Address: 100 BANTRY DR
City-St-Zip: LAKE MARY, FL 32746

Title: DT () Delete
Name: JOHNSON, JOAN
Address: 244 NORTH KEECH
City-St-Zip: DAYTONA, FL 32114

Title: DV () Delete
Name: RICHARDSON, BONNIE
Address: 13800 SOUTH MAGNOLIA
City-St-Zip: OCALA, FL 34473

Title: D () Delete
Name: JACKSON, CHARLES
Address: 808 EAST LINE STREET
City-St-Zip: MELBOURNE, FL 32901

Title: D () Delete
Name: NELSON, PATRICIA
Address: 4817 PINE AVE
City-St-Zip: COLEMAN, FL 33521

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: D (X) Change () Addition
Name: NELSON, PATRICIA
Address: 4817 PINE AVE
City-St-Zip: COLEMAN, FL 33521

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: ADRIAN HOLLOWAY

DS

05/02/2007

Electronic Signature of Signing Officer or Director

Date