2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000496

FILED Jan 31, 2007 Secretary of State

Entity Name: DAYTONA HIGHLANDS CIVIC ASSOCIATION INC

Current Principal Place of Business: New Principal Place of Business: 1153 AUSTRALIA AVE DAYTONA BEACH, FL 32114 **Current Mailing Address: New Mailing Address:** 1153 AUSTRALIA AVE DAYTONA BEACH, FL 32114 FEI Number: 20-4067332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FREEMAN, KEITH E 1153 AUSTRALIA AVE DAYTONA BEACH, FL 32114 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete NEWBERRY, JESS Name: Name: 512 TARRAGONA WAY Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: () Change () Addition Name: CAMARA, TANYA Name: Address: 444 TARRAGONA WAY Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: () Change () Addition FREEMAN, KEITH E Name: Name: 1153 AUSTRALIA AVE Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: () Delete Title: Title: () Change () Addition RADCLIFFE, KATHY Name: Name: 1116 MADRID AVE Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: () Change () Addition FREEMAN, ANJELA A Name: Name: 1153 AUSTRALIA AVE Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: (X) Change () Addition MARZITELLI, FRANK LINDSEY, RYAN Name: Name: Address: 430 TARRAGONA WAY Address: 100 TARRAGONA WAY DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 City-St-Zip: 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: KEITH E FREEMAN T 01/31/2007