

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 04, 2008 8:00 am**  
**Secretary of State**

02-04-2008 90048 018 \*\*\*\*61.25

**DOCUMENT # N06000002992**

1. Entity Name  
INTERSTATE COMMERCE PARK OF DAYTONA BEACH  
OWNERS' ASSOCIATION INC.



Principal Place of Business  
1530 CORNERSTONE BLVD SUITE 100  
DAYTONA BEACH, FL 32117

Mailing Address  
P.O. BOX 10809  
DAYTONA BEACH, FL 32120



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01082008 Chg-NP CR2E037 (12/06)

4. FEI Number  
65-1275429

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

APGAR, ROBERT F  
1530 CORNERSTONE BLVD SUITE 100  
DAYTONA BEACH, FL 32117

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME MOOTHART, GARY  
STREET ADDRESS 1530 CORNERSTONE BLVD SUITE 100  
CITY-ST-ZIP DAYTONA BEACH, FL 32117

TITLE DP ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME GARN, TED  
STREET ADDRESS 1530 CORNERSTONE BLVD SUITE 100  
CITY-ST-ZIP DAYTONA BEACH, FL 32117

TITLE DV ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME CRISP, LINDA  
STREET ADDRESS 1530 CORNERSTONE BLVD SUITE 100  
CITY-ST-ZIP DAYTONA BEACH, FL 32117

TITLE DS ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE AS ☒ Change ☐ Addition  
NAME Gary, Marisa  
STREET ADDRESS 1530 CORNERSTONE BLVD SUITE 100  
CITY-ST-ZIP DAYTONA BEACH, FL 32117

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Linda Crisp*

Linda Crisp, Secretary

Date

Daytime Phone #

386-274-2202