

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90094 045 ****61.25

DOCUMENT # N06384

1. Corporation Name

VOLUSIA COUNTY BUSINESS DEVELOPMENT CORPORATION

Principal Place of Business

1901 MASON AVENUE
SUITE 107
DAYTONA BEACH FL 32117
US

Mailing Address

1901 MASON AVENUE
SUITE 107
DAYTONA BEACH FL 32117
US

3 7 5 3 7 0 - 9 0 0 9 4 - 4 5



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

11/29/1984

4. FEI Number

59-2479590

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

KANEY, JONATHAN JR.
COBB & COLE, PA
150 N. MAGNOLIA AVE.
DAYTONA BCH. FL 32014

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE DT
NAME REID, GINA
STREET ADDRESS 1940 STATE ROAD 44
CITY-ST-ZIP NEW SMYRNA BEACH FL

TITLE D
NAME WATTS, ALLEN
STREET ADDRESS 150 MAGNOLIA AVE.
CITY-ST-ZIP DAYTONA BCH FL 32114

TITLE D
NAME MCDERMOTT, LARRY
STREET ADDRESS 120 S RIDGEWOOD
CITY-ST-ZIP DAYTONA BEACH FL

TITLE D
NAME WHITE, BEEBE
STREET ADDRESS 1474 W GRANADA BLVD, STE 495
CITY-ST-ZIP ORMOND BEACH FL

TITLE C
NAME SMITH, GEORGE
STREET ADDRESS 133 E. INDIANA AVENUE
CITY-ST-ZIP DELAND FL

TITLE D
NAME CORNETT, TAVER B
STREET ADDRESS 500 E NEW YORK AVE
CITY-ST-ZIP DELAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☒ Addition

1.1 TITLE P
1.2 NAME Drewry Page
1.3 STREET ADDRESS 957 Pelican Bay Drive
1.4 CITY-ST-ZIP Daytona Beach, FL 32114

2.1 TITLE D
2.2 NAME Terry B. Wells
2.3 STREET ADDRESS 648 S. Ridgewood Ave
2.4 CITY-ST-ZIP Daytona Beach, FL 32114

3.1 TITLE C
3.2 NAME CIARE, PAUL
3.3 STREET ADDRESS 1327 N. US Hwy 1
3.4 CITY-ST-ZIP ORMOND Beach, FL 32174

4.1 TITLE D
4.2 NAME John E. Evans
4.3 STREET ADDRESS 1041 Dunlawton Ave, Suite 250
4.4 CITY-ST-ZIP Port Orange, FL 32119

5.1 TITLE D
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/14/99

904/274-3800

CR2E037 (11/98)