

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011600

FILED  
Mar 19, 2009  
Secretary of State

**Entity Name:** DAYTONA BEACH AREA ATTRACTIONS ASSOCIATION, INC.

**Current Principal Place of Business:**

4931 S. PENINSULA DRIVE  
PONCE INLET, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

4931 S. PENINSULA DRIVE  
PONCE INLET, FL 32127

**New Mailing Address:**

**FEI Number:** 26-1438531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHELLEY & SHELLEY, CPA,PA  
1515 HERBERT ST., SUITE 213  
PORT ORANGE, FL 32129 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: P ( ) Delete  
Name: ATHERHOLT, WAYNE  
Address: 4931 S. PENINSULA DRIVE  
City-St-Zip: PONCE INLET, FL 32127

Title: V ( ) Delete  
Name: GUNN, ED  
Address: 4931 S. PENINSULA DRIVE  
City-St-Zip: PONCE INLET, FL 32127

Title: T ( ) Delete  
Name: BENNET, MIKE  
Address: 4931 S. PENINSULA DRIVE  
City-St-Zip: PONCE INLET, FL 32127

Title: S ( ) Delete  
Name: MERKLIN, KRISTIE  
Address: 1805 CONCEPT CT.  
City-St-Zip: DAYTONA BEACH, FL 32114

**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: S (X) Change ( ) Addition  
Name: GINNY, KENT  
Address: 1805 CONCEPT CT.  
City-St-Zip: DAYTONA BEACH, FL 32114

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: MICHAEL BENNETT

T

03/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date