

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N14505

1. Entity Name

VOLUSIA CIVIL TRIAL ATTORNEYS ASSOCIATION, INC.

FILED

00 MAY 16 AM 10:08

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business Mailing Address
701 N. Peninsula Drive Post Office Box 567
Daytona Beach, FL 32118, Daytona Bch., FL 32115-
U.S. 0567

2. Principal Place of Business 3. Mailing Address

REINSTATEMENT 98.00

Suite, Apt. #, etc., Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number
59-1890070

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

Philip J. Chanfrau, Jr.
701 N. Peninsula Drive
Daytona Beach, FL 32118

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW
FEE IS \$14.35

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	Philip J. Chanfrau, Jr.	
STREET ADDRESS	701 N. Peninsula Drive	
CITY-ST- ZIP	Daytona Beach, FL 32118	
TITLE	DV	☐ Delete
NAME	Marla Rawnsley	
STREET ADDRESS	501 N. Grandview Avenue	
CITY-ST- ZIP	Daytona Beach, FL 32118	
TITLE	TD	☐ Delete
NAME	Terrill J. LaRue	
STREET ADDRESS	511 S. Ridgewood Avenue	
CITY-ST- ZIP	Daytona Beach, FL 32114	
TITLE	SD	☐ Delete
NAME	Rick Kolodinsky	
STREET ADDRESS	647 S. Ridgewood Avenue	
CITY-ST- ZIP	Daytona Beach, FL 32114	
TITLE	D	☐ Delete
NAME	William Chanfrau	
STREET ADDRESS	701 N. Peninsula Drive	
CITY-ST- ZIP	Daytona Beach, FL 32118	
TITLE	D	☒ Delete
NAME	David Monaco	
STREET ADDRESS	444 Seabreeze Blvd., Suite 900	
CITY-ST- ZIP	Daytona Beach, FL 32118	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	☐ Change ☐ Addition
NAME	800003274848
STREET ADDRESS	-06/02/00--01059--0176
CITY-ST- ZIP	*****358.75 *****358.75
TITLE	☐ Change ☐ Addition
NAME	800003274848
STREET ADDRESS	-06/02/00--01053--0127
CITY-ST- ZIP	*****8.75 *****8.75
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST- ZIP	
TITLE	☐ Change ☐ Addition
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 exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

RE