## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N19418

FILED Jan 16, 2009 Secretary of State

Entity Name: DAYTONA BEACH AREA CONVENTION AND VISITORS BUREAU, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
P. O. BOX	ANGE AVENU 910 BEACH, FL (				
urrent Mailing Address:			New Mailing Addre	New Mailing Address:	
P. O. BOX	ANGE AVENU 910 BEACH, FL 3				
El Number	: 59-2778577	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
lame and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
50 MAGN DAYTONA The above	IOLIA AVENUI A BEACH, FL 3	32114 US	purpose of changing its register	red office or registered agent, or both,	
	<b>⊃</b> ⊏.				
SIGNATU		:- 0:	1	D-1-	
	Electror	ic Signature of Registered Ag	•	Date	
			•	Date GES TO OFFICERS AND DIRECTOR	
	Electror	TORS: Delete SSY, JIM	•		
DFFICER itle: lame: ddress:	Electron  S AND DIREC  C ( ) O' SHAUGHNES PO BOX 2811 DAYTONA BEA  VC ( ) FAGAN, CHRIS	TORS:  Delete SSY, JIM  CH, FL 32115  Delete  NATIONAL SPEEDWAY BLVD.	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTOR	
DFFICER. itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	Electron  S AND DIREC  C ( ) O' SHAUGHNE: PO BOX 2811 DAYTONA BEA  VC ( ) FAGAN, CHRIS 1798 W. INTER DAYTONA BEA	Delete SSY, JIM CH, FL 32115 Delete NATIONAL SPEEDWAY BLVD. CH, FL 32114 Delete NK TIC AVENUE	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition	
tle: ame: ddress: ity-St-Zip: tle: ame: ddress: ity-St-Zip: tle: ame: ddress:	Electron  S AND DIREC  C ( ) O' SHAUGHNES PO BOX 2811 DAYTONA BEA  VC ( ) FAGAN, CHRIS 1798 W. INTER DAYTONA BEA  STT ( ) MOLNAR, FRAI 2435 S. ATLAN DAYTONA BEA	Delete SSY, JIM CH, FL 32115 Delete NATIONAL SPEEDWAY BLVD. CH, FL 32114 Delete NK TIC AVENUE CH, FL 32118 Delete N A E AVENUE	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address: Address:	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

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: SHARON A. MOCK PRES 01/16/2009