2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23624

Entity Name: DELAND R/C CLUB, INC.

FILED Jan 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

PO BOX 884

DELAND, FL 32721

Current Mailing Address: New Mailing Address:

PO BOX 884

DELAND, FL 32720

FEI Number: 59-2896695 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GRAY, WILLIAM WHITE, TOM

1671 HAZEN RD 240 COUNTRY CIR D

DELAND, FL 32720 US DAYTONA BEACH, FL 32128 US

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: WAYNE MARTIN 01/07/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 VOIGHT, HAROLD
 Name:
 WAYNE, MARTIN

 Address:
 941 VILLIAGE LAKE DR.
 Address:
 PO BOX 884

 City-St-Zip:
 DELAND, FL 32724
 City-St-Zip:
 DELAND, FL 32721 08

Title: VPR () Delete Title: VPR (X) Change () Addition

 Name:
 MARTIN, WAYNE
 Name:
 TOM, BROWN

 Address:
 PO BOX 884
 Address:
 3408 LIMETREE DR

 City-St-Zip:
 DELAND, FL 32721
 City-St-Zip:
 EDGEWATER, FL 32141

Title: TRES () Delete Title: () Change () Addition

 Name:
 MORIN, ROGER
 Name:

 Address:
 682 WINTERBERRY TR
 Address:

 City-St-Zip:
 DELAND, FL 32724
 City-St-Zip:

Title: SEC (X) Delete Title: () Change () Addition

 Name:
 WILLIAM, GRAY
 Name:

 Address:
 1671 HAZEN RD
 Address:

 City-St-Zip:
 DELAND, FL 32720
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WAYNE MARTIN PRES 01/07/2005