

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90198 010 ****61.25

DOCUMENT # N29825

1. Entity Name

DAYTONA BEACH SHORES CHAMBER OF COMMERCE, INCORPORATED



Principal Place of Business

**3048 S ATLANTIC AVENUE
DAYTONA BEACH SHORES FL 32118
US**

Mailing Address

**3048 S ATLANTIC AVENUE
DAYTONA BEACH SHORES FL 32118
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1494211**

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

**MANDALA, PAULETTE
14 VENETIAN WAY NORTH
DAYTONA BEACH SHORES FL 32127**

Name **TRACY FLINT**

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

1000 15th St. #1302

Holly Hill FL

City

FL

Zip Code

32117

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. I am familiar with, and accept the obligations of registered agent:

SIGNATURE

Tracy Flint

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-29-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☐ Delete
NAME	SMITH, DEB	
STREET ADDRESS	101 BROWN CRANE CT	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	D	☐ Delete
NAME	MOUSSALLI, JULIEN	
STREET ADDRESS	3621 S. ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32127	
TITLE	VPD	☐ Delete
NAME	KENT, GINNY	
STREET ADDRESS	133 INLET HARBOR ROAD	
CITY-ST-ZIP	PONCE INLET FL 32127	
TITLE	T	☐ Delete
NAME	TOBIN, JIM	
STREET ADDRESS	454 S. YONGE ST.	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE	SD	☐ Delete
NAME	HARAPAS, CAROLINE	
STREET ADDRESS	3640 S ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BEACH SHORES FL 32127	
TITLE	D	☐ Delete
NAME	DEITCH, LARRY	
STREET ADDRESS	31440 S. ATLANTIC AVE.	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	

TITLE	President	☒ Change ☐ Addition
NAME	James H. TOBIN	
STREET ADDRESS	454 S. Yonge St.	
CITY-ST-ZIP	ORMOND Bch. FL 32174	
TITLE	Vice President	☒ Change ☐ Addition
NAME	Connie Boivin	
STREET ADDRESS	2301 S. Atlantic Ave	
CITY-ST-ZIP	Daytona Bch, Shores FL 32118	
TITLE	Secretary	☒ Change ☐ Addition
NAME	Frank DeMarchi	
STREET ADDRESS	111 International Speedway Blvd.	
CITY-ST-ZIP	Daytona Bch FL 32114	
TITLE	Treasurer	☒ Change ☐ Addition
NAME	Gail Hinton	
STREET ADDRESS	2025 S. Atlantic Ave.	
CITY-ST-ZIP	Daytona Beach Shores, FL 32118	
TITLE	Director	☐ Change ☐ Addition
NAME	Smith, Deb	
STREET ADDRESS	101 Brown Crane Ct	
CITY-ST-ZIP	Daytona Beach, FL 32114	
TITLE	Director	☐ Change ☐ Addition
NAME	Kent Ginny	
STREET ADDRESS	133 Inlet Harbor Rd	
CITY-ST-ZIP	Ponce Inlet FL 32127	

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 of Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Tracy S. Flint

Date

Daytime Phone

JAMES H. TOBIN

CR2E037 (10/02)