2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2009
Secretary of State

DOCUMENT# N48382

Entity Name: DAYTONA BEACH 154, INC.

Current Principal Place of Business:

25 BARKLEY LANE
PALM COAST, FL 32137 US

New Principal Place of Business:

Current Mailing Address:

25 BARKLEY LANE
PALM COAST, FL 32137 US

New Mailing Address:

FEI Number: 59-3105766 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LINDEOLSSON, VIVIANE
25 BARKLEY LANE
PALM COAST, FL 32137 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:	JAYE, RANDY	
Address:	44 WHITE MARSH CIRCLE	
City-St-Zip:	ORLANDO, FL 32824	
Title:	VP	( ) Delete
Name:	MCKNIGHT, JESSE	
Address:	POB 398	
City-St-Zip:	BUNNELL, FL 32110	
Title:	D	( ) Delete
Name:	BRANSFORD, THOMAS	
Address:	304 W. MINNESOTA AVE.	
City-St-Zip:	DELAND, FL 32720	
Title:	T	( ) Delete
Name:	LINDEOLSSON, VIVIANE Y	
Address:	25 BARKLEY LANE	
City-St-Zip:	PALM COAST, FL 32137 US	
Title:	D	( ) Delete
Name:	EPP, EDWARD C	
Address:	32 CREEK BLUFF RN.	
City-St-Zip:	FLAGLER BEACH, FL 32136	
Title:	S	( ) Delete
Name:	LINDEOLSSON, VIVIANE	
Address:	25 BARKLEY LANE	
City-St-Zip:	PALM COAST, FL 32137	

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:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: VIVIANE LINDEOLSSON TREA 05/08/2009

Electronic Signature of Signing Officer or Director — Date