

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N48650

1. Entity Name
RESIDENT INITIATIVE COUNCIL OF NORTHWOOD VILLAGE, INCORPORATED

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90310 024 ****61.25

Principal Place of Business Mailing Address

1200 NINTH STREET
DAYTONA BEACH, FL. SAME

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

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TILLMON, THOMASENE
1200 NINTH STREET
DAYTONA BEACH, FLORIDA 32117

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 *Thomasene Tillmon*

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

(NOTE: Registered Agent signature required when reinstating)

4/10/2000
DATE

FILE NOW:
FEE IS \$81.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME PD Tillmon Thomesene ☐ Delete
STREET ADDRESS 1200 Ninth Street #30
CITY-ST-ZIP Daytona Beach, FL. 32117

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME *MD* Ms. Juanita Jones ☐ Delete
STREET ADDRESS 11200 Ninth Street #52
CITY-ST-ZIP Daytona Beach, Florida-32117

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME TD Williams, Hattie ☐ Delete
STREET ADDRESS 1200 Ninth Street, #17
CITY-ST-ZIP Daytona Beach, FL. 32117

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME *SD* Ms. Juanita Jones ☐ Delete
STREET ADDRESS 1200 Ninth Street #52
CITY-ST-ZIP Daytona Beach, Florida 32117

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME *PD* Scott, Walter ☐ Delete
STREET ADDRESS 1200 Ninth Street, Apt. 46
CITY-ST-ZIP Daytona Beach, FL. 32117

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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: *Thomasene Tillmon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/2000
DATE

CR2E037 (9/99)