

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 11 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N94000000899 (4)

1. Corporation Name

DAYTONA BEACH GOLF CHARITIES, INC.



Principal Place of Business

Mailing Address

1275 W. GRANADA BLVD.  
SUITE 4C  
ORMOND BEACH FL 32174  
US1275 W. GRANADA BLVD.  
SUITE 4C  
ORMOND BEACH FL 32174-8105  
US3. Date Incorporated or Qualified  
02/11/19943a. Date of Last Report  
02/28/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-3214096

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALMER, ANN J  
1275 W. GRANADA BLVD.  
SUITE 4C  
ORMOND BEACH FL 33174

81 Name

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

83

84 City

FL

85

Zip Code

32174

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE  
NAME BROADHURST, JANE  
STREET ADDRESS P.O. BOX 2830 (N/A)  
CITY-ST-ZIP DAYTONA BEACH FL 32120-28301.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIPTITLE D ☐ DELETE  
NAME FREER, DAVE  
STREET ADDRESS 226 GLENBRIAR CIRCLE  
CITY-ST-ZIP DAYTONA BEACH FL 321182.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIPTITLE D ☐ DELETE  
NAME MIRABEL, GEORGE  
STREET ADDRESS P.O. BOX 2475 (N/A)  
CITY-ST-ZIP DAYTONA BEACH FL 32115-24753.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIPTITLE D ☐ DELETE  
NAME HARDEMAN, JEFF  
STREET ADDRESS 2330 SHAWNEE MISSION PKWY  
CITY-ST-ZIP WESTWOOD KS 662054.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE D ☒ DELETE  
NAME KELLY, LAWRENCE  
STREET ADDRESS 512 PELICAN BAY DR.  
CITY-ST-ZIP DAYTONA BEACH FL 321195.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE D ☐ DELETE  
NAME HIGGS, CHRIS  
STREET ADDRESS 157 GULL DRIVE SOUTH  
CITY-ST-ZIP DAYTONA BEACH FL 321146.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/97

904-672-7900

Date

Daytime Phone

CR2E037 (9/96)