

FILE NOW: FILING FEE IS \$61.25

FILED
May 19 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000002291 (2)

1. Corporation Name

OLD DAYTONA CIVIC ASSOCIATION, INC.



Principal Place of Business

Mailing Address

LIVE OAK INN
448 S BEACH ST
DAYTONA BEACH FL 32114
US

P.O. BOX 1997
DAYTONA BEACH FL 32115
US

3. Date Incorporated or Qualified

05/06/1994

4. FEI Number

59-3184328

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes

☐

No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FISHER, VINTON, DR.
420 S. BEACH ST.
ORMOND BEACH FL 32174

81 Name

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

83

84 City

FL

85

Zip Code

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

TITLE DC
NAME WEED, S D
STREET ADDRESS 134 LOOMIS AVE
CITY-ST-ZIP DAYTONA BEACH FL

☒ DELETE

TITLE TD
NAME BUTLER, BONNIE
STREET ADDRESS 719 S BEACH ST 104C
CITY-ST-ZIP DAYTONA BEACH FL

☐ DELETE

TITLE DVC
NAME BUTLER, DORIS
STREET ADDRESS 45 E. BAYSHORE DR
CITY-ST-ZIP DAYTONA BEACH FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CHAIRMAN DIRECTOR
1.2 NAME Wimberly William DC
1.3 STREET ADDRESS 506 PALMETTO
1.4 CITY-ST-ZIP DAYTONA BEACH FL 32114

☒ Change

☐ Addition

2.1 TITLE
2.2 NAME BONNIE Butler
2.3 STREET ADDRESS 717 S BEACH ST 105C
2.4 CITY-ST-ZIP DAYTONA BEACH FL 32114

☐ Change

☐ Addition

3.1 TITLE VICE CHAIRMAN
3.2 NAME HENRY ROSEY EVA DVC
3.3 STREET ADDRESS 715 S BEACH ST
3.4 CITY-ST-ZIP DAYTONA BEACH FL 32114

☒ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 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: Bonnie Butler, Bonnie Butler 4/12/98 9:44 758 5729

CR2E037 (10/97)