
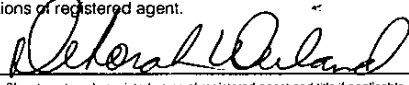
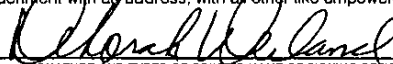


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90171 018 ****61.25

DOCUMENT # N94000003633 1. Entity Name ORMOND INTERCHANGE COMPLEX PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32114-3438			Mailing Address 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32114-3438		
2. Principal Place of Business 444 SEABREEZE BLVD.		3. Mailing Address 444 SEABREEZE BLVD.			
Suite, Apt. #, etc. STE 1000		Suite, Apt. #, etc. STE 1000		03032005 Chg-NP CR2E037 (10/03)	
City & State DAYTONA BEACH, FL		City & State DAYTONA BEACH, FL		4. FEI Number 59-3299287	
Zip 32118		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TOWER, DEVIN % CHARLES WAYNE PROPERTIES INC. 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32114-3438				7. Name and Address of New Registered Agent Name: Street Address (P.O. Box Number is Not Acceptable) 444 SEABREEZE BLVD. STE 1000 City: DAYTONA BEACH, FL Zip Code: 32118	
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:  DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	DP HOLUB, PAUL F JR. P.O. BOX 906 (N/A) ORMOND BEACH, FL 32175	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.O. BOX 730086 ORMOND BEACH, FL 32173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LICHTIGMAN, CHARLES S 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 321143438	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	444 SEABREEZE BLVD. STE 1000 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST TOWER, DEVIN 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 321143438	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	444 SEABREEZE BLVD. SUITE 1000 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEILAND, DEBORAH A 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 321143438	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	444 SEABREEZE BLVD. SUITE 1000 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)
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:  Deborah Weiland				3/17/05 386-238-3600	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>	

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