

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N95000004236 (4)

1. Corporation Name

COLIN'S PARK, INC.



Principal Place of Business

Mailing Address

945 NO. HALIFAX AVENUE
DAYTONA BEACH FL 32118

945 NO. HALIFAX AVENUE
DAYTONA BEACH FL 32118

3. Date Incorporated or Qualified

09/01/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

593344019

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

8. 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

EVERY, LANGFORD
2310 SO. PENINSULA AVENUE
DAYTONA BEACH FL 32118

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 D ☐ DELETE

NAME CANN, CAROL
STREET ADDRESS 315 JESSAMINE BLVD.
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE D ☐ DELETE

NAME EVERY, LANGFORD V
STREET ADDRESS 2310 SO. PENINSULA DRIVE
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE TD ☐ DELETE

NAME GRAHAM, KELLI J
STREET ADDRESS 115 CHESHIRE ROAD
CITY-ST-ZIP DAYTONA BEACH FL 32118

TITLE D ☐ DELETE

NAME TRAVIS, CHRISTINA
STREET ADDRESS 1320 PEACHTREE ROAD
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE SD ☐ DELETE

NAME RAND, HEIDI
STREET ADDRESS 1309 WANDERING OAKS DRIVE
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE D ☐ DELETE

NAME GURNEY, IAN
STREET ADDRESS POST OFFICE BOX 906 N/A
CITY-ST-ZIP DAYTONA BEACH FL 32115-0906

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

500001738225
--03/11/96--01010--011
***61.25

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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

2/19/96

736-0227

CR2E037 (12/95)