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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N97000000276

1. Corporation Name

**RESIDENT INITIATIVE COUNCIL OF MALEY APARTMENTS,
INC.**

Principal Place of Business

600 SO BEACH ST
DAYTONA BEACH FL 32114

Mailing Address

C/O RAYMOND A. PHELAN, CPA
623 N. GRANDVIEW AVENUE
DAYTONA BEACH FL 32118



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

30

3. Date Incorporated or Qualified

01/13/1997

4. FEI Number

59-3439227

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

9. Name and Address of Current Registered Agent

HARVEY, GRACE
600 SO BEACH ST
DAYTONA BEACH FL 32114

10. Name and Address of New Registered Agent

81 Name

Mary Smith

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

600 South Beach Street

83

84 City

Daytona Beach, FL.

FL

85 Zip Code

32114

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

Robert S. Williams

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE PD
NAME ROBERT WILLIAMS
STREET ADDRESS 600 S BEACH ST #4J
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE VPD
NAME RUTH MCBAIN
STREET ADDRESS 600 S BEACH ST #4M
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE SD
NAME GRACE HARVEY
STREET ADDRESS 600 S BEACH ST #2A
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE TD
NAME HARRISON, CLARICE
STREET ADDRESS 600 S BEACH ST #4C
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE PD
NAME EILEEN GRUBER
STREET ADDRESS 600 S BEACH ST #5M
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 SD
Mary Smith
600 South Beach Street Apt. 11A
Daytona Beach, Florida 32114

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS PD
Bernice Vaughn

5.4 CITY-ST-ZIP

5.5 STREET ADDRESS 600 S. Beach Street
Daytona Beach, Florida 32114 Apt # 6H

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

Robert S. Williams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/99

Daytime Phone #

CR2E037 (11/98)