

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000276

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** RESIDENT INITIATIVE COUNCIL OF MALEY APARTMENTS, INC.

**Current Principal Place of Business:**

600 S. BEACH ST  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 59-3439227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AKIN, LINDA R  
600 S BEACH ST  
DAYTONA BEACH, FL 32114 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: AKIN, LINDA  
Address: 600 S BEACH ST  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: S  
Name: BECKWITH, DEBBIE  
Address: 600 S BEACH ST 7B  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VP  
Name: LOWE, JEANNETTE  
Address: 600 S. BEACH STREET 9H  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: T  
Name: BRODNICK, DARLENE MS  
Address: 600 S BEACH ST 3J  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: P  
Name: LYONS, SHARON MS  
Address: 600 S BEACH ST 10A  
City-St-Zip: DAYTONA BEACH, FL 32114

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LINDA AKIN

P

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date