## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N9700000276

1. Entity Name

## RESIDENT INITIATIVE COUNCIL OF MALEY APARTMENTS, INC.



Principal Place of Business Mailing Address C/O RAYMOND A. PHELAN, CPA 600 SO BEACH ST DAYTONA BEACH FL 32114 623 N. GRANDVIEW AVENUE DAYTONA BEACH FL 32118 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Country

pplicable

## FILED May 05, 2003 8:00 am § Secretary of State

05-05-2003 90336 016 \*\*\*\*61.25

41090979

5. Certificate of Status Desired

| ☐ CHECK HERE IF MAKING CHANGES |             |  |  |
|--------------------------------|-------------|--|--|
| 4. FEI Number 59-3439227       | Applied For |  |  |
|                                |             |  |  |

| Box Number is Not Acceptable)                      |  |
|----------------------------------------------------|--|
| Box Number is Not Acceptable)                      |  |
| Street Address (P.O. Box Number is Not Acceptable) |  |
|                                                    |  |
| FL Zip Code                                        |  |
| a                                                  |  |

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 | Carl Keever                                                       |
|-----------|-------------------------------------------------------------------|
|           | Signature, typed or printed name of registered agent and title if |
|           |                                                                   |

(NOTE: Registered Agent signature required when reinstating)

4/14/03 DATE

| FILE | NOW: | FEE IS | \$61.25 |
|------|------|--------|---------|
|------|------|--------|---------|

9. Election Campaign Financing
Trust Fund Contribution.\$5.00 May Be
Added to Fees

Make Check Payable to Florida Department of State

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition VAUGHN, BERNICE NAME NAME STREET ADDRESS 600 S BEACH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114 Delete ☐ Addition ☐ Change KEEVER, CARL NAME: 600 S BEACH ST #2F STREET ADDRESS STREET ADDRESS CITY:SY-ZIP: DAYTONA BEACH FL 32114 CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change Addition KIMBALL, KAREN NAME NAME STREET ADDRESS 600 S BEACH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114 TITLE ☐ Delete TITLE ☐ Change ☐ Addition MARCOTTE, GREGORY NAME NAME STREET ADDRESS 600 S BEACH ST STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME Vaughn, Bernice NAME 600 SOUTH BEACH STREET, APT 6H STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DAYTONA BEACH FL 32114** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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:

SIGNAKEE SECUIRED

4/26/03

CR2E037 (10/02

Not Applicable

**\$8.75** Additional