

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90047 022 ****61.25

DOCUMENT # N97000005193

1. Entity Name
DELTONA SPRING FEST, INC.



Principal Place of Business
P.O. BOX 5724
DELTONA, FL 32728-5724

Mailing Address
P.O. BOX 5724
DELTONA, FL 32728-5724

34004029



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01202004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-3456743

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROWN, MARLENE
2936 MCCLELLAN ST
DELTONA, FL 32738

Name *Peggy Fisher*

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

900 Yellowbird Ave

City *Deltona*

FL

Zip Code *32725*

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 *Peggy Fisher* *PEGGY FISHER, Pres.*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 D ☒ Delete
NAME HERNANDEZ, JOHN
STREET ADDRESS 1360 PROVIDENCE BLVD
CITY-ST-ZIP DELTONA, FL 32725

TITLE PD ☒ Change ☒ Addition
NAME *Peggy Fisher*
STREET ADDRESS *900 Yellowbird Ave*
CITY-ST-ZIP *Deltona, FL 32725*

TITLE PD ☒ Delete
NAME HARRIS, RANDOLPH
STREET ADDRESS 3370 GEORGE SAULS STREET
CITY-ST-ZIP DELTONA, FL 32738

TITLE VD ☒ Change ☒ Addition
NAME *Mary Myers*
STREET ADDRESS *2426 Barbarossa*
CITY-ST-ZIP *Deltona, FL 32738*

TITLE TD ☒ Delete
NAME BROWN, MARLENE T
STREET ADDRESS 2936 MCCLELLAN
CITY-ST-ZIP DELTONA, FL 32738

TITLE VD ☒ Change ☐ Addition
NAME *Charles Hart*
STREET ADDRESS *1349 Mantoya*
CITY-ST-ZIP *Deltona, FL 32738*

TITLE DS ☐ Delete
NAME BARBERI, DINA
STREET ADDRESS 2555 VESPERO ST
CITY-ST-ZIP DELTONA, FL 32738

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME VASQUEZ, MARITZA
STREET ADDRESS 752 WATERFALL CIR
CITY-ST-ZIP DELTONA, FL 32725

TITLE TD ☒ Change ☐ Addition
NAME *Dale Barberi*
STREET ADDRESS *2555 Vespero St.*
CITY-ST-ZIP *Deltona, FL 32738*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: *Peggy Fisher* *PEGGY FISHER* *2/3/04* *386-860-1006*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #