

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007 8:00 am
Secretary of State

02-28-2007 90011 012 ****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

40025915



02242007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3456743

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FISHER, PEGGY
900 YELLOWBIRD AVE.
DELTONA, FL 32725

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed 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, 2007

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 PD ☐ Delete
NAME FISHER, PEGGY
STREET ADDRESS 900 YELLOWBIRD AVE.
CITY-ST-ZIP DELTONA, FL 32725

TITLE **TD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME TAGGART, Nanci
STREET ADDRESS 3141 NEWMARK DR
CITY-ST-ZIP DELTONA, FL 32738

TITLE **PD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME HART, CHARLES
STREET ADDRESS 1349 MANTOYA
CITY-ST-ZIP DELTONA, FL 32738

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WILLEY, BARBARA
STREET ADDRESS 1407 SECTION LINE TRAIL
CITY-ST-ZIP DELTONA, FL 32725

TITLE **SD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VSD ☐ Delete
NAME HORN, TAMMY
STREET ADDRESS 2042 SWANSON DR
CITY-ST-ZIP DELTONA, FL 32738

TITLE **VD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☒ Delete
NAME HORN, MARY
STREET ADDRESS 2042 SWANSON DR
CITY-ST-ZIP DELTONA, FL 32738

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 exemptions contained in Chapter 119, 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

18 Feb 2007 386-860-1006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #