

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005193

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Entity Name:** DELTONA SPRING FEST, INC.

**Current Principal Place of Business:**

900 YELLOWBIRD AVE.  
DELTONA, FL 327285724

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5724  
DELTONA, FL 327285724

**New Mailing Address:**

**FEI Number:** 59-3456743

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FISHER, PEGGY  
900 YELLOWBIRD AVE.  
DELTONA, FL 32725 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: STD  
Name: FISHER, PEGGY  
Address: 900 YELLOWBIRD AVE.  
City-St-Zip: DELTONA, FL 32725

Title: D  
Name: MCKNIGHT, NATASHA  
Address: 2910 NEWMARK DR  
City-St-Zip: DELTONA, FL 32738

Title: VPD  
Name: LAFARO, MARY ANN  
Address: 2966 DERBY DRIVE  
City-St-Zip: DELTONA, FL 32738

Title: PD  
Name: MCKNIGHT, DAVID  
Address: 2910 NEWMARK DRIVE  
City-St-Zip: DELTONA, FL 32738

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: PEGGY FISHER

STD

01/14/2011

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

\_\_\_\_\_  
Date