2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)** 

## Feb 23, 2005 8:00 am Secretary of State DOCUMENT # P00000018243 1. Entity Name 02-23-2005 90083 034 \*\*\*150 00 DAYTONA BEACH FEET, INC. Principal Place of Business Mailing Address 67 MILLBROOK ST. WORCESTER MA 01606 1610 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH FL 32119 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 4. FEI Number Applied For City & State City & State 59-3627315 Not Applicable Country Zip. Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 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 DATE Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. Delete TITLE Change ☐ Addition TITLE NEVILLE, SHAWN NAME NAME STREET ADDRESS 90 MCKEE DRIVE STREET ADDRESS **MAHWAH NJ 07430** CITY-ST-ZIP CITY-ST-ZIP VΡ ☐ Change ☐ Addition TITLE ☐ Delete THILE GARAHAN, TIMOTHY NAME NAME 67 MILLBROOK ST. STREET ADDRESS STREET ADDRESS WORCESTER MA 01606 CITY+ST-ZIP CITY-ST-ZIP **PRESIDENT** ☑ Delete hange TITLE ☐ Addition TITLE RICHARDS, MAUREEN NAME NAME Maureen Richards STREET ADDRESS 933 MACARTHUR BOULEVARD STREET ADDRESS MacARTHUR BLVD., MAHWAH, NJ 07430 CITY-ST-ZIP 933 CITY-ST-ZIP MAHWAH NJ 07430 Delete ☐ Change ☐ Addition TITLE SCHILLING, ROBERT K NAME 933 MACARTHUR BOULEVARD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAHWAH NJ 07430 CITY-ST-ZIP Change ☐ Delete ☐ Addition ZANNA, VINCENT NAME 1 CROSFIELD AVE STREET ADDRESS STREET ADDRESS WEST NYACK NY 10994 CITY-ST-7/P CITY-ST-ZIP ☐ Change ☐ Addition Defete TITLE TITLE SCHUBACK, MARC G NAME NAME 933 MACARTHUR BOULEVARD STREET ADDRESS STREET ADDRESS MAHWAH NJ 07430 CITY-ST-7IP CITY-ST-7IP

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 607, 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. TIMOTHYGARAHAN

SIGNATURE:

FEB - 1 2005

Davime Phone #

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