

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000065867

1. Entity Name

DAYTONA BEACH CLUB RENTAL ASSOCIATION, INC.

Principal Place of Business

800 N ATLANTIC AVE
DAYTONA BEACH FL 32118

Mailing Address

800 N ATLANTIC AVE
DAYTONA BEACH FL 32118

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

/ip

Country

3. Mailing Address

507-C Herbert St.

Suite, Apt. #, etc.

City & State

Port Orange, FL

Zip

32119

Country

4. FEL Number

59-3662130

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REIMER, R L
507 C HERBERT ST
PORT ORANGE FL 32119

Name

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

City

State

Zip Code

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and date of application

(NOTE: Registered Agent signature must be notarized and signed)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☒ Addition

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

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NAME

STREET ADDRESS

CITY-STATE-ZIP

13. 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 11 or Block 12, if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE:

Robert G. Ash

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-01

904-253-4310

FILED
May 19, 2001 8:00 am
Secretary of State

04-26-2001 90092 032 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)