


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 19, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000016632 1. Entity Name DAYTONA MEMORIAL PROPERTIES, INC.	
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Principal Place of Business 1425 BELLEVUE AVENUE DAYTONA BEACH, FL 32114	Mailing Address 1425 BELLEVUE AVENUE DAYTONA BEACH, FL 32114
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07072004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 75-2994044	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  LOHMAN, LOWELL 1210 JOHN ANDERSON DR ORMOND BEACH, FL 32176
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**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE P NAME LOHMAN, LOWELL STREET ADDRESS 1210 JOHN ANDERSON DR CITY ST ZIP ORMOND BEACH, FL 32176	
TITLE VTS NAME LOHMAN, NANCY STREET ADDRESS 1210 JOHN ANDERSON DR CITY ST ZIP ORMOND BEACH, FL 32176	
TITLE V NAME LOHMAN, TY STREET ADDRESS 1210 JOHN ANDERSON DR CITY ST ZIP ORMOND BEACH, FL 32176	
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07072004  
 07/19/04-60015-020 550.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c) 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 a different fee empowered.

SIGNATURE: *Nancy Johnson* 7-12-04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR