

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000111923

**FILED**  
**Feb 19, 2011**  
**Secretary of State**

**Entity Name:** CHILDREN'S COUNTRY CLUB OF DAYTONA BEACH, INC.

**Current Principal Place of Business:**

515 N. RIDGEWOOD AVENUE  
DAYTONA BEACH, FL 32114 US

**New Principal Place of Business:**

**Current Mailing Address:**

515 N. RIDGEWOOD AVENUE  
DAYTONA BEACH, FL 32114 US

**New Mailing Address:**

**FEI Number:** 56-2418218

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAZZARA, LINDSEY A  
121 TROPIC BIRD COURT  
DAYTONA BEACH, FL 32119 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:** P  
**Name:** LAZZARA, LINDSEY A  
**Address:** 121 TROPIC BIRD COURT  
**City-St-Zip:** DAYTONA BEACH, FL 32119 US

**Title:** V  
**Name:** LAZZARA, LINDSEY A  
**Address:** 121 TROPIC BIRD COURT  
**City-St-Zip:** DAYTONA BEACH, FL 32119 US

**Title:** S  
**Name:** LAZZARA, LINDSEY A  
**Address:** 121 TROPIC BIRD COURT  
**City-St-Zip:** DAYTONA BEACH, FL 32119 US

**Title:** T  
**Name:** LAZZARA, LINDSEY A  
**Address:** 121 TROPIC BIRD COURT  
**City-St-Zip:** DAYTONA BEACH, FL 32119 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** LINDSEY LAZZARA

PRES

02/19/2011

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

\_\_\_\_\_  
Date