

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -2 PM 2:42

DOCUMENT # P93000085688 (8)

1. Corporation Name

REYNOLDS & ASSOCIATES OF DAYTONA INC.

Principal Place of Business

Mailing Address

305 KINGSTON RD.
DAYTONA BEACH FL 32114

305 KINGSTON RD.
DAYTONA BEACH FL 32114

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

12/10/1993

04/07/1994

4. FEI Number

59-3213107

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 800 SO. NOVA ROAD

25 800 SO. NOVA ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 S

27 S

City & State

City & State

23 ORMOND BEACH, FL

28 ORMOND BEACH, FL

Zip

Country

Zip

Country

24 32174

25 US

29 32174

30 US

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

Trust Fund Contribution

☐

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STRACHAN, ROBERT N JR.

~~305 KINGSTON RD.~~

800 SO. NOVA RD.

~~DAYTONA BEACH FL 32114~~ ORMOND BEACH, FL
32174

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when nonstatutory)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	STRACHAN, ROBERT N JR.
STREET ADDRESS	339 BARTLEY RD.
CITY - ST - ZIP	DAYTONA BEACH FL 32114
TITLE	D
NAME	REYNOLDS, LOREN W
STREET ADDRESS	1524 OAK FOREST DR.
CITY - ST - ZIP	ORMOND BEACH FL 32174
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or block 13 if changed, or on an attachment with my acknowledgment.

SIGNATURE:

R. N. Strachan Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

Date

Signature (Print Name)