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May 09 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000037186 (1)

1. Corporation Name

DAYTONA ROLLER HOCKEY ASSOCIATION, INC.

Principal Place of Business

Mailing Address

661 BEVILLE RD
STE 115
SO DAYTONA FL 32119
US

P.O. BOX 15145
DAYTONA BEACH FL 32115-5145
US

3. Date Incorporated or Qualified

05/17/1994

3a. Date of Last Report

04/28/1996

2. Principal Place of Business

2a. Mailing Address

21 437 S. ORLANDO AVE.
Suite, Apt #, etc.

26 437 S. ORLANDO AVE
Suite, Apt #, etc.

4. FEI Number

59-3247459

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

24 32751 25 USA 29 32751 30

9. Name and Address of Current Registered Agent

ROBERT M CARR
304 WAVERLY CIRCLE
DAYTONA BEACH, FLORIDA
TALLAHASSEE FL 32118

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST
NAME ZATTOLO, CHRISTINE
STREET ADDRESS 24109 MINK RD
CITY-ST-ZIP ASTOR FL

☐ DELETE

TITLE VP
NAME DELLANNO, ARCHIE
STREET ADDRESS 24109 MINK ROAD
CITY-ST-ZIP ASTOR FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP
1.2 NAME SALVATORE F. ZATTOLO
1.3 STREET ADDRESS 24109 MINK RD
1.4 CITY-ST-ZIP ASTOR, FL 32102

☐ Change

☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. I do 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 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 an address.

SIGNATURE:

CHRISTINE R. ZATTOLO

CHRISTINE R. ZATTOLO

4/17/97

904-734-250
407-
444-9995

CR2E034 (9/96)