## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT 1999



Mailing Address

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9800003319

1. Corporation Name

Principal Place of Business

DAYTONA BEACH CONDO RENTALS INC.

PO BOX 265511 PO BOX 265511  DAYTONA BEACH FL 32126-5511 DAYTONA BEACH FL 32			FL 32126-551	S-5511			DO NOT WRITE IN THIS SPACE				
							Date Incorporated or Qua	lifed			
2. Principal Pl	ace of Business	2a. Mailing Addre	ess				FEI Number 9-3487の	62	L	pplied For ot Applicable	
Suite, Apt. 1	#, etc	Suite, Apt. #,	etc.			5. (	Certifcate of Status Desire	ed 🗆		Additional equired	
City & State	)	City & State		**		1	Election Campaign Financ Trust Fund Contribution	cing		May Be to Fees	
Zip	Country Zip 25 29 3			Country 30			This corporation owes the Personal Property Tax.	current year Int	angible Yes	<b>D</b> ANo	
9. Name and Address of Current Registered Agent						10.	Name and Address of N	ew Registered	Agent		
4521	PORATE CREATIONS ENTERPRIS PGA BOULEVARD #211 I BEACH GARDENS FL 33418	81 82 83	Street Add	onr dress (P. S	O. Box Number is Not Ac	ceptable)					
				84	O-M	\ong	1 Bch	FL	. 13:	Code	
office or re	to the provisions of Sections 607.0502 ogistered agent, or both, in the State of in familiar with, and accept the opligati	f Florida. Such chan	de was autho	inzed by	e-named corporati	noration	submits this statement fo ard of directors. I hereby a	accept the appoi	illillent as i	s registered egistered	
SIGNATURE	Signature, typed or printed name of registered agent	Jun 3	<b>T</b>	7	Fur	red when rei		3-23-9			
12.	OFFICERS AND			13.		. A	DDITIONS/CHANGES TO	O OFFICERS A			
TITLE	D	□ D	ELETE	1.1 TITLE	ļ				Change	Addition	
NAME	CAUDILL, JAMES A			1.2 NAME	Ì						
STREET ADDRESS	PO BOX 265511 N/A			1.3 STREE	TADORESS						
CITY-ST-ZIP	DAYTONA BEACH FL 32126-55			1.4 CITY-5	ST-ZIP					The state of the s	
TITLE		□ D	ELETE	2.1 TITLE					☐ Change	☐ Addition	
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- CITY-ST-ZIP -	<u> </u>			2. 4 CITY-ST-ZIP							
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STREET ADDRESS				3.3 STREE	TADDRESS						
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NAME				6.2 NAME	T ADDDCCC						
STREET ADDRESS	<u> </u>				TADDRESS						
CITY-SY-ZIP	•			6.4 CITY+	SI-ZIP						

14. 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 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, with all other like empowered.

**FILED** 

Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90001 024 \*\*\*150.00