

FILED
Jan 08, 2007 08:00 AM
Secretary of State

1. Entity Name
DAYTONA GOLF CARTS, INC.




Mailing Address
PO BOX 327 WELLS ST.
GREENFIELD, MA 01302 US

DO NOT WRITE IN THIS SPACE



01032007 00000000 00000000000000

4. FEI Number 59-3558272	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** 

6. Name and Address of Current Registered Agent

**DO NOT WRITE
IN THIS SPACE**

TINSLEY, GARY W
213 SILVER BEACH AVE
DAYTONA BEACH, FL 32118

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing

Trust Fund Contribution. ☐ \$5.00 ☒ 000000
☐ 0000000000

10.	OFFICERS AND DIRECTORS
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TITLE	D
NAME	NARBE, BRUCE
STREET ADDRESS	P O BOX 901
CITY-ST-ZIP	ORCHARD PARK, NY 14127

TITLE	D
NAME	BERNIER, JAMES
STREET ADDRESS	275 WELLS STREET
CITY - ST - ZIP	GREENFIELD, MA 013020327

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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01/09/07-80024-008 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James Beaulieu
AG OFFICER OR DIRECTOR

1/3/07
Date

413 7720955
Daytime Phone #