

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000057182

1. Entity Name

MID-FLORIDA TOURIST BUREAU CORP.

**FILED**  
**May 18, 2000 8:00 am**  
**Secretary of State**

05-18-2000 90380 035 \*\*\*150.00

Principal Place of Business

Mailing Address

1 OCEANS WEST BOULEVARD  
SUITE 1686  
DAYTONA BEACH FL 32118

POST OFFICE BOX 7706  
DAYTONA BEACH SHORES FL 32116-7706

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3583586

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

Name

CANDY A. JOHNSON

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

525 Marina Pt. Drive

City

Daytona Beach

FL

Zip Code

32114

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME JOHNSON, CANDY A  
STREET ADDRESS 1 OCEANS WEST BOULEVARD  
CITY-ST-ZIP DAYTONA BEACH FL 32118 ☐ Delete

TITLE PD  
NAME JOHNSON, CANDY A.  
STREET ADDRESS 525 Marina Pt. Drive  
CITY-ST-ZIP DAYTONA BEACH FL. 32114 ☒ Change ☐ Addition

TITLE VD  
NAME DION, DAVID G  
STREET ADDRESS 1 OCEANS WEST BOULEVARD  
CITY-ST-ZIP DAYTONA BEACH FL 32118 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE STD  
NAME LILLY, JOHN I  
STREET ADDRESS 1 OCEANS WEST BOULEVARD  
CITY-ST-ZIP DAYTONA BEACH FL 32118 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Candy A. Johnson Candy A. Johnson 4/07/00 9049352009  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)