

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S84045

FILED  
Mar 30, 2005  
Secretary of State

Entity Name: VOLUSIA REPORTING COMPANY

## Current Principal Place of Business:

150 S PALMETTO AVE  
SUITE 101  
DAYTONA BEACH, FL 32114

## New Principal Place of Business:

432 SOUTH BEACH STREET  
DAYTONA BEACH, FL 32114

## Current Mailing Address:

150 S PALMETTO AVE  
SUITE 101  
DAYTONA BEACH, FL 32114

## New Mailing Address:

432 SOUTH BEACH STREET  
DAYTONA BEACH, FL 32114

FEI Number: 59-3084410

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TUMBLESON, J. DOYLE  
150 S PALMETTO AVE  
BOX A  
DAYTONA BEACH, FL 32114 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KUNDID, PAULITA E.,  
Address: 150 E PALMETTO AVE #101  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: DST ( ) Delete  
Name: KUNDID, MICHAEL A  
Address: 430 N ATLANTIC AVE  
City-St-Zip: DAYTONA BEACH, FL 32118

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: KUNDID, PAULITA E.,  
Address: 432 SOUTH BEACH STREET  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: DST (X) Change ( ) Addition  
Name: GREINER, GLENN P  
Address: 432 SOUTH BEACH STREET  
City-St-Zip: DAYTONA BEACH, FL 32114

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAULITA E. KUNDID

PRES

03/30/2005

Electronic Signature of Signing Officer or Director

Date