

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 713154

**Entity Name:** COUNCIL ON AGING OF VOLUSIA COUNTY, INC.

**Current Principal Place of Business:**

160 N BEACH ST  
DAYTONA BEACH, FL 32114

**Current Mailing Address:**

P O BOX 671  
DAYTONA BEACH, FL 32115-0671 US

**FEI Number: 59-1160221**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVE  
DAYTONA BCH, FL 32114 US

*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

**Officer/Director Detail :**

Title P  
Name TUCKER, DICK  
Address 5510 S ATLANTIC  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title VP  
Name LYNN, DAVE  
Address PO BOX 2851  
City-State-Zip: DAYTONA BEACH FL 32120

Title PD  
Name O'SHAUGHNESSY, JIM  
Address 1210 GAMBLE PLACE  
City-State-Zip: DAYTONA BEACH FL 32118

Title TR  
Name MOCK, SHARON  
Address 970 N HALIFAX DRIVE  
City-State-Zip: ORMOND BEACH FL 32176

Title S  
Name GURTIS, AIMEE  
Address 76 N ST ANDREWS DRIVE  
City-State-Zip: ORMOND BEACH FL 32174

Title CFO  
Name WARREN, DAN D  
Address 160 N BEACH ST  
City-State-Zip: DAYTONA BEACH FL 32114

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: DAN D. WARREN**

**CFO**

**04/29/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date