2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2012
Secretary of State

DOCUMENT# 757418

Entity Name: DAMON BENEVOLENT ASSOCIATION, INC.

Current Principal Place of Business:

5890 SUGAR PALM CT
A
DELRAY BEACH, FL 33484

New Principal Place of Business:

Current Mailing Address:

5890 SUGAR PALM CT
A
DELRAY BEACH, FL 33484

New Mailing Address:

FEI Number: 59-2328233 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALPERIN, MELVIN B
5890 SUGAR PALM CT
A
DELRAY BEACH, FL 33484 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

OFFICERS AND DIRECTORS:

Title: STD
Name: ALPERIN, MELVIN B
Address: 5890 SUGAR PALM CT APT A
City-St-Zip: DELRAY BEACH, FL 33484

Title: VPD
Name: DUBIN, LAWRENCE
Address: 9606 ORCHID GROVE TERRACE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: PD
Name: FRANKEL, MORTON
Address: 9866 LEMONWOOD WAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TRS
Name: HERSHKOWITZ, SAM
Address: 7717 CHERRY BLOSSOM ST
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TRS
Name: MELTZER, IRWIN
Address: 9646 CHERRY BLOSSOM CT
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TRS
Name: STEINBERG, NORMAN
Address: 9515 HONEYBELL CIR
City-St-Zip: BOYNTON BEACH, FL 33437

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: MELVIN B. ALPERIN STD 02/08/2012

Electronic Signature of Signing Officer or Director — Date