

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007715

**FILED
Jan 29, 2004
Secretary of State**

Entity Name: DISABLED PATRIOTS OF AMERCIA, INCORPORATED

Current Principal Place of Business:

1670 NW 42 STREET
OAKLAND PARK, FL 33309

New Principal Place of Business:

702 NORTH E STREET
LAKE WORTH, FL 33460 US

Current Mailing Address:

PO BOX 7389
DELRAY BEACH, FL 33482

New Mailing Address:

702 NORTH E STREET
LAKE WORTH, FL 33460

FEI Number: 03-0519640 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GALLAGHER, MARIA
1670 NW 42 STREET
OAKLAND PARK, FL 33309

Name and Address of New Registered Agent:

GALLAGHER, MARIA
702 NORTH E STREET
LAKE WORTH, FL 33460 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: MARIA GALLAGHER 01/29/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: GALLAGHER, MARIA
Address: 1670 NW 42 ST
City-St-Zip: OAKLAND PARK, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: GALLAGHER, MARIA
Address: 702 NORTH E STREET
City-St-Zip: LAKE WORTH, FL 33460 US

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

SIGNATURE: MARIA GALLAGHER PTD 01/29/2004

Electronic Signature of Signing Officer or Director Date