2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 15, 2001 8:00 am
Secretary of State

06-15-2001 90169 040 ****61.25

DOCUMENT # N30969

1. Entity Name

DISABLED AMERICAN VETERANS AUXILIARY, DEPARTMENT

Principal Place of Business	Mailing Address
17601 VETERANS WAY P. O. BOX 999 MICANOPY FL 32667-7999	17601 VETERANS WAY P. O. BOX 999 MICANOPY FL 32667-7999

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 23-7331165 — Applied For / Not Applicable

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
MCCARTHY, LUCILLE O. 3420 BAYSHORE BLVD. NE ST. PETERSBURG FL 33703	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD NAME LANGE, RAMONA M STREET ADDRESS 1447 FOGGY RIDGE PARKWAY CITY-ST-ZIP LUTZ FL 33549	☒ Delete	TITLE PD NAME SEARS, Alice STREET ADDRESS 14 Ferdinand Lane CITY-ST-ZIP Palm Coast, FL 32137	☐ Change ☒ Addition
TITLE VPD NAME EGAN, KAY STREET ADDRESS 1647 COUNTRY CLUB PARKWAY CITY-ST-ZIP LEHIGH ACRES FL 33972	☒ Delete	TITLE VPD NAME EASTIN, Winona STREET ADDRESS 10218 Noddy Tern Road CITY-ST-ZIP Brooksville, FL 34613	☐ Change ☒ Addition
TITLE VPD NAME EGAN, KAY STREET ADDRESS 104 COUNTRY CLUB PARKWAY CITY-ST-ZIP LEHIGH ACRES FL 33972	☒ Delete	TITLE VPD NAME SORRENTINO, Bernadette STREET ADDRESS 1054 Bacon Circle CITY-ST-ZIP Palm Bay, FL 32905	☐ Change ☒ Addition
TITLE TD NAME ROUSSEY, DELORES ANN STREET ADDRESS 1447 FOGGY RIDGE PRKW CITY-ST-ZIP LUTZ FL 33549	☒ Delete	TITLE TD NAME FERGUSON, Myra STREET ADDRESS 10728 59th Avenue N CITY-ST-ZIP Seminole, FL 33772	☐ Change ☒ Addition
TITLE SD NAME BARZELOGNA, SUNNY JOAN STREET ADDRESS R 1 BOX 146-D CITY-ST-ZIP BUNNELL FL 32110	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VPD NAME DOUGLAS, AMELIA STREET ADDRESS 7785 US HIGHWAY 17 SOUTH CITY-ST-ZIP ZOLFO SPRINGS FL 33890	☐ Delete	TITLE VPD NAME BARNSHAW, Marna STREET ADDRESS 808 53rd Ave E #147J CITY-ST-ZIP Bradenton, FL 34203	☐ Change ☒ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Myra Ferguson, Treasurer 6/09/01 727 319-7444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #