

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006231

FILED  
Feb 09, 2012  
Secretary of State

**Entity Name:** ABIGAIL BARTHOLOMEW CHAPTER, DAUGHTERS OF THE AMERICAN REVOLUTION, INC.

**Current Principal Place of Business:**

KATHLEEN JACOBS  
370 NORTH NOVA RD APT A  
DAYTONA BEACH, FL 32114 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 10265  
DAYTONA BEACH, FL 32120 US

**New Mailing Address:**

**FEI Number:** 59-6153545

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACOBS, KATHLEEN  
370 NORTH NOVA RD APT 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CALDWELL, SARA  
Address: PO BOX 2023  
City-St-Zip: DAYTONA BEACH, FL 32115

Title: D  
Name: VOGEL, CATHY  
Address: 5759 JOHN ANDERSON HWY  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: S  
Name: COUNTS, KATE  
Address: 8 HIGHWOOD RIDGE TRAIL  
City-St-Zip: ORMOND BEACH, FL 32174

Title: T  
Name: JACOBS, KATHLEEN  
Address: PO BOX 10265  
City-St-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: KATHLEEN M JACOBS

TREA

02/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date