

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728089

**Entity Name:** BAY PINES-HOLIDAY ISLES CHAPTER #13, DISABLED  
AMERICAN VETERANS, INC.**Current Principal Place of Business:**4801 37TH ST N  
SAINT PETERSBURG BCH, FL 33706**Current Mailing Address:**4801 37TH ST N  
SAINT PETERSBURG BCH, FL 33706 US**FEI Number:** 59-6196561**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VIDELL, MERRICK  
3751 51ST AVENUE N  
ST. PETERSBURG, FL 33744 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:** MERRICK VIDELL

03/01/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	KING, LAWRENCE
Address	4646 32ND AVENUE N
City-State-Zip:	SAINT PETERSBURG FL 33713

Title	VP
Name	HARLAN, HAROLD
Address	10424 HOLIDAY SHORE DRIVE
City-State-Zip:	LARGO FL 33773

Title	SECRETARY
Name	VIDELL, MERRICK
Address	3751 51ST AVENUE
City-State-Zip:	ST. PETERSBURG FL 33714

Title	DIRECTOR
Name	MASON, ARTHUR
Address	4631 60TH STREET N
City-State-Zip:	KENNETH CITY FL 33709

Title	TREASURER
Name	BRAND, MICHAEL E
Address	4000 24TH STREET N #1006
City-State-Zip:	ST. PETERSBURG FL 33714

*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:** MERRICK VIDELL**SECRETARY**

03/01/2017

Electronic Signature of Signing Officer/Director Detail

Date