

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30969

Entity Name: DISABLED AMERICAN VETERANS AUXILIARY, DEPARTMENT OF FLORIDA, INC.

FILED
Mar 10, 2021
Secretary of State
9713395064CC

Current Principal Place of Business:

2015 SW 75TH STRET
GAINESVILLE, FL 32607

Current Mailing Address:

407 FLETCHER STREET
PORT CHARLOTTE, FL 33954

FEI Number: 23-7331165

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FRANZ, DIANE J
4225 VANITA COURT
WINTER SPRINGS, FL 32708-4951 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: DIANE J. FRANZ

03/10/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SD
Name FRANZ, DIANE
Address 4225 VANITA COURT
City-State-Zip: WINTER SPRINGS FL 32708-4951

Title TD
Name ROUSSEY, DELORES
Address 407 FLETCHER STREET
City-State-Zip: PORT CHARLOTTE FL 33954

Title DIRECTOR
Name PIERCE, PAULETTE
Address 1406 FLOYD DRIVE
#206
City-State-Zip: TITUSVILLE FL 32955-2602

Title COMMANDER
Name RABER, AMIE
Address 5688 25TH STREET CIRCLE E
City-State-Zip: BRADENTON FL 34203

Title DIRECTOR
Name MCGINNIS, ROSE
Address 3734 HUNTINGTON AVENUE
City-State-Zip: MIMS FL 32754-6649

Title IMMEDIATE PAST COMMANDER
Name HOLLOWAY, MARIA
Address 4014 CREE DRIVE
City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR
Name PARKER, CLAUDIA
Address 346 HERITAGE ESTATES LANE
City-State-Zip: DELAND FL 32720

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: DELORES KADLEC ROUSSEY

TREASURER

03/10/2021

Electronic Signature of Signing Officer/Director Detail

Date