


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90011 046 ****61.25

DOCUMENT # 725278 1. Entity Name DISABLED AMERICAN VETERANS CHAPTER 84-HOLLYHILL, FLORIDA, INC.					
Principal Place of Business HOLLY HILL FLORIDA, INC. 605 8TH STREET HOLLY HILL FL 32117 US			Mailing Address HOLLY HILL FLORIDA, INC. 605 8TH STREET HOLLY HILL FL 32117 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-6196574 <div style="float: right;"> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SCHMELZ, ANGUS S 109 BEAU RIVAGE DR. ORMOND BEACH FL 32176			Name BROWN, GILBERT G. Street Address (P.O. Box Number is Not Acceptable) 299 Eddie Ave. City HOLLY HILL FL Zip Code 32117		
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Gilbert G. Brown</i></u> GILBERT G. BROWN, ADJUTANT 2/22/06 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE</small>					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, CLIFFORD		NAME	MICHAEL J. HARMON	
STREET ADDRESS	764 OSPREY DR		STREET ADDRESS	1501 CARMEN AVE	
CITY-ST-ZIP	PORT ORANGE FL 32127		CITY-ST-ZIP	HOLLY HILL, FL 32117	
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HARMON, MIKE H		NAME	RICHARD L. TOLFA	
STREET ADDRESS	1501 CARMEN AVE		STREET ADDRESS	46 WINDING CREEK WAY	
CITY-ST-ZIP	HOLLY HILL FL 32117		CITY-ST-ZIP	ORMOND BEACH, FL 32174	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEPNOWSKI, ED		NAME	ED STEPNOWSKI	
STREET ADDRESS	155 CORAL CR		STREET ADDRESS	155 CORAL CIRCLE	
CITY-ST-ZIP	DAYTONA BEAC FL 32119		CITY-ST-ZIP	30, DAYTONA, FL 32119	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHMELZ, ANGUS S		NAME		
STREET ADDRESS	109 BEAU RIVAGE DR		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH FL 32176		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BROWN, GILBERT G		NAME		
STREET ADDRESS	299 EDDIE AVE		STREET ADDRESS		
CITY-ST-ZIP	HOLLY HILL FL 32117		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHMELZ, ANGUS S		NAME		
STREET ADDRESS	109 BEAU RIVAGE DR.		STREET ADDRESS		
CITY-ST-ZIP	ORMOND BEACH FL 32176		CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Gilbert G. Brown* **GILBERT G. BROWN** **2/22/06 (386) 252-4551**