2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 735706 Mar 23, 2010
Secretary of State

Entity Name: JOHN T. HENSLEY CHAPTER 96, DISABLED AMERICAN VETERANS, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

601 CR 489

LAKE PANASOFFKE, FL 33538

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 974

LAKE PANASOFFKE, FL 33538

FEI Number: 23-7098922 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NORMAN, GARY W SR POST OFFICE 1532 WEBSTER, FL 33597 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: FLYNN, JOSEPH E JR

Address: 601 CR 489

City-St-Zip: LAKE PANASOFFKEE, FL 33538 US

Title: VP

Name: KURRASCH, LLOYD

Address: 601 CR 489

City-St-Zip: LAKE PANASOFFKEE, FL 33538 US

Title: S

Name: RENKIEWICZ, STANLEY L

Address: 601 CR 489

City-St-Zip: LAKE PANASOFFKEE, FL 33538 US

Title: T

Name: NORMAN, GARY W SR

Address: 601 CR 489

City-St-Zip: LAKE PANASOFFKEE, FL 33538 US

Title: VP

Name: PHILLIPS, ROBERT W

Address: 601 CR 489

City-St-Zip: LAKE PANASOFFKEE, FL 33538 US

Title: VP

Name: DICKERSON, LLOYD S

Address: 601 CR 489

City-St-Zip: LAKE PANASOFFKEE, FL 33538 US

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: GARY W. NORMAN, SR T 03/23/2010