

2000 UNIFORM BUSINESS REPORT (UBR)

05-21-2001 90369 009 ***297.50

746140

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JUN 12 AM 9:10

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DOCUMENT # 746140

1. Entity Name

DUNEDIN CHAPTER 103, DISABLED AMERICAN VETERANS.

Principal Place of Business

Mailing Address

360 DOUGLAS AVE
DUNEDIN FL 34698
US

P.O. BOX 1072
DUNEDIN FL 34697-1072

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7098925

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SNODSMITH, JAMES H.
2373 MANGRUM DR.
DUNEDIN FL 34698

7. Name and Address of New Registered Agent

Name **John B. McNatt**

Street Address (P.O. Box Number is Not Acceptable)

2043 Buford Blvd

City **Clearwater** FL Zip Code **33763**

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.

SIGNATURE

John B. McNatt

John B. McNatt Treas. 5-17-01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE **P** Delete
NAME **FRANK, HOWARD A**
STREET ADDRESS **1503 NELSON AVE**
CITY-ST-ZIP **CLEARWATER FL 33755**

TITLE **S** Delete
NAME **DEAN, JAMES E SR.**
STREET ADDRESS **3063 TERRANCE VIEW LN**
CITY-ST-ZIP **CLEARWATER FL 33759**

TITLE **L** Delete
NAME **LAWRENCE, BRIAN E**
STREET ADDRESS **12005 73RD ST. N**
CITY-ST-ZIP **LARGO FL 33773**

TITLE **D** Delete
NAME **DANNENBERGER, MAYNARD W.**
STREET ADDRESS **1939 PINEHURST RD.**
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE **D** Delete
NAME **SABO, STEPHEN J**
STREET ADDRESS **3301 ALT 19N LOT 116**
CITY-ST-ZIP **DUNEDIN FL 34698**

TITLE **D** Delete
NAME **JOHANSEN, FRANCES E**
STREET ADDRESS **52 PENZANCE CT**
CITY-ST-ZIP **SAFETY HARBOR FL 34695**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** Change Addition
NAME **Robert A. Backlund**
STREET ADDRESS **3973 Tarpon Pt. Cir.**
CITY-ST-ZIP **Palm Harbor, FL 34684**

TITLE **J** Change Addition
NAME **John B. McNatt**
STREET ADDRESS **2043 Buford Blvd**
CITY-ST-ZIP **Clearwater FL 33763**

TITLE **D** Change Addition
NAME **Bruce Reitz**
STREET ADDRESS **1614 Amberlea Dr N.**
CITY-ST-ZIP **Dunedin, FL 34698**

TITLE **D** Change Addition
NAME **JAMES V. CRAM**
STREET ADDRESS **2305 NASH ST**
CITY-ST-ZIP **Clearwater, FL 33765**

TITLE **D** Change Addition
NAME **Philip W. Belote**
STREET ADDRESS **629 ORANGWOOD DR**
CITY-ST-ZIP **Dunedin, FL 34698**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

John B. McNatt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5 17 01 727 319 7444
Date Daytime Phone #

CR2E037 (9/99)

REINSTATEMENT 00-01

