

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758778

FILED
Jan 05, 2007
Secretary of State

Entity Name: ANTHONY P. DADDI DISABLED AMERICAN VETERANS, CHAPTER 119, INC.

Current Principal Place of Business:

4071 NORTHWEST 5TH STREET
COCONUT CREEK, FL 33066

New Principal Place of Business:

1791 MEARS P'KWY
MARGATE, FL 33063

Current Mailing Address:

4071 NORTHWEST 5TH STREET
COCONUT CREEK, FL 33066

New Mailing Address:

1791 MEARS P'KWY
MARGATE, FL 33063

FEI Number: 59-2598766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OREFICE, FRANK J.
4071 NORTHWEST 5TH STREET
COCONUT CREEK, FL 33066 US

Name and Address of New Registered Agent:

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: MS () Delete
Name: OREFICE, FRANK,
Address: 4071 NW 5 ST.
City-St-Zip: COCONUT CREEK, FL

Title: D () Delete
Name: GENTRY, STANLEY
Address: 2204 SEAGRAPE CIRCLE
City-St-Zip: COCONUT CREEK, FL 33066

Title: D () Delete
Name: PERROTTI, CALVIN
Address: 340 SW 69TH AVE
City-St-Zip: MARGATE, FL 33066

Title: P () Delete
Name: TOOLEY, FRANK
Address: 4411 COCONUT CREEK BLVD
City-St-Zip: COCONUT CREEK, FL

Title: D () Delete
Name: CHRISTIE, GARY J
Address: 2011 NW 70TH LANE
City-St-Zip: MARGATE, FL 33063

Title: T () Delete
Name: RODES, DOUGLAS,
Address: 18800 GARBO TERRACE 6
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LAMBERTI, FRANCIS G
Address: 1851 RIVERWOOD LANE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANK J. OREFICE

MS

01/05/2007

Electronic Signature of Signing Officer or Director

Date