## **\*2002 UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # 765281**

1. Entity Name

Zip

10.

TITLE

NAME

NAME\*

STREET ADDRESS

STREET ADDRESS

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CITY-ST-ZIP

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TITLE

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NAME

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NAME

CITY-ST-ZIP

CITY-ST-ZIP

SHAW, EUGENE

218 KIRK ROAD

JACKSONVILLE FL 32218

SHAW, EUGENE

JACKSONVILLE FL 32218

JACKSONVILLE FL 32218

COLEMAN, DONALD

CALLAHAN FL 32011

1433 JUNIOR ROAD

DUBBERLY, THURMAN C

JACKSONVILLE FL 32218

HEDGEPETH, CALVIN H

JACKSONVILLE FL 32207

3945 Pittman dr e

1268 QUAIL ROAD

218 KIRK RD

ROYAL, JACOB

621 BIRD ROAD

VD

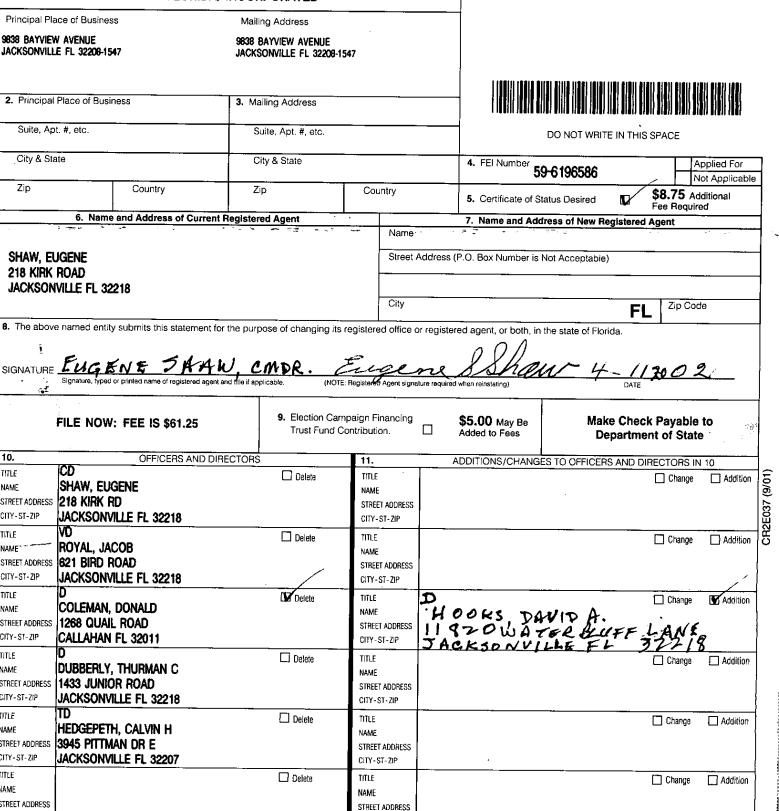
## BEVERLY HILLS, CHAPTER 21, DISABLED AMERICAN VET ERANS, DEPARTMENT OF FLORIDA, INCORPORATED

Country

Principal Place of Business	Mailing Address
9838 BAYVIEW AVENUE JACKSONVILLE FL 32208-1547	9838 BAYVIEW AVENUE JACKSONVILLE FL 32208-1547
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

## **FILED** Apr 22, 2002 8:00 am § Secretary of State

04-22-2002 90335 007 \*\*\*\*70.00



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.

CITY-ST-ZIP