## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # N00000000502**

1. Entity Name
DISABLED AMERICAN VETERANS AUXILIARY INC **JACKSONVILLE #1** 





**FILED** 

1439 PARENTAL HOME ROAD IACKSONVILLE, FL 32216			1439 PARENTAL HOME ROAD IACKSONVILLE, FL 32216				40025204			
2. Principal P	Place of Busin	ess - No P.O. Box #	3. Mailing Address	;						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02082007	Chg-NP	CR2E037 (12/0	6)	
City & State			City & State			4. FEI Numb NOT AI	er PPLICABLE		Applied For Not Applicable	
Zip	Zip Country		Zip	Zip Cou		5. Certificate	5. Certificate of Status Desired		Additional uired	
	6. Name	and Address of Current	Registered Agent			7. Name and	Address of New F	Registered Agent		
DEALY, LOLA R 4361 KNOTTINGBY CT JACKSONVILLE, FL 32257					Street Addi	ress (P.O. Box Numb	er is Not Acceptabl	le)		
					City			FL Zip C	Code	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature)						required when reinstating)		DATE		
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution.			1			
	_					\$5.00 May E Added to Fees		ilake check payabl rida Department o		
10.	_		Trust		ion.	Added to Fees	Flor		State	
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JACKSONVILLE, FL 32257

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions conferred for a 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 attackment with an address, with all other incorporation.

STREET ADDRESS Paine, Marjorie

STREET ADDRESS 3933 PRITMORE

SIGNATURE

Jean Christian