2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 08:00 AM
Secretary of State

DOCUMENT # N01000002762

1. Entity Name
DAVA S/SGT. WILLIAM E. HILL, UNIT #87, INC.

Principal Place of Business	Mailing Address
510 MONTCLAIR RD LEESBURG, FL 34748	915 CHULA COURT LADY LAKE, FL 32159

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01142006 No Chg-NP CR2E037 (11/05)

4. FEI Number
23-7331163
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WALDRON, FLORENCE M
915 CHULA CT
LADY LAKE, FL 32159

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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 _____ DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	HULBERT, ANNA J
STREET ADDRESS	1113 DUSTIN DRIVE
CITY ST ZIP	LADY LAKE, FL 32159
TITLE	SVCD
NAME	PARKER, DEBORAH Y
STREET ADDRESS	9910 CANTERBURY DRIVE
CITY ST ZIP	LEESBURG, FL 34788
TITLE	JVCD
NAME	GRZANICH, LINDA S
STREET ADDRESS	4851 SAWGRASS LAKE CIRCLE
CITY ST ZIP	LEESBURG, FL 34748
TITLE	T
NAME	WALDROW, FLORENCE M
STREET ADDRESS	915 CHULA CT
CITY ST ZIP	LADY LAKE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Florence M Waldron FLORENCE M. WALDRON - Adj. TRES
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR