

2003 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # N03000001566	
1. Entity Name DISABLED AMERICAN VETERANS AUXILARY CHAS GUSTAFSON #94 INC	

Principal Place of Business 1428 ARCHER ST LEHIGH ACRES FL 33972 US	Mailing Address 1428 ARCHER ST LEHIGH ACRES FL 33972 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)	
4. FEI Number 33-1044929	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WARREN, AGNES M 1428 ARCHER ST LEHIGH ACRES FL 33972	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip 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 <i>Agnes M. Warren</i>	DATE 1-23-08
(NOTE: Registered Agent signature is used when resigning)	

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GREGORY, BEVERLY 17 FINWOOD LEHIGH ACRES FL 33972 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition U00000802707 02/04/08-80010-013 70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WARREN, AGNES M 1428 ARCHER ST LEHIGH ACRES FL 33972 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC EGAN, KAY 1427 COUNTRY CLUB PKWY LEHIGH ACRES FL 33972 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JVC DEX, D'ANGELO 208 TREE SWALLOW CT LEHIGH ACRES FL 33936 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LC HARTMAN, DOROTHY 28 COSMOPOLITAN DR., #13 LEHIGH ACRES FL 33936 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO HARTMAN, ERNEST 28 COSMOPOLITAN DR., #13 LEHIGH ACRES FL 33936 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.	
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SIGNATURE: <i>Agnes M. Warren</i>	DATE: 1-23-08
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