

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

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90216 037 ****70.00

DOCUMENT # N04000012092

1. Entity Name
DSI SUPPORTERS, INC.



Principal Place of Business
25145 TWIN OAKS LANE
FERNANDINA BEACH, FL 32034

Mailing Address
25145 TWIN OAKS LANE
FERNANDINA BEACH, FL 32034

40083838



04112007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2446084

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CARAWAY, VIRGINIA L
25145 TWIN OAKS LANE
FERNANDINA BEACH, FL 32034

**DO NOT WRITE
IN THIS SPACE**

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. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME CARRAWAY, EDWARD A
STREET ADDRESS 25145 TWIN OAKS LANE
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

TITLE TD
NAME FOSTER, VIOLA M
STREET ADDRESS 5504 MELLI LANE
CITY-ST-ZIP NORTH FORT MYERS, FL 33917

TITLE D
NAME HUNZIKER, KARL
STREET ADDRESS 1550 LEE BLVD, STE 318
CITY-ST-ZIP LEHIGH ACRES, FL 33936

TITLE SD
NAME CARAWAY, VIRGINIA L
STREET ADDRESS 25145 TWIN OAKS LANE
CITY-ST-ZIP FERNANDINA BEACH, FL 32034

TITLE VD
NAME STOVER, DONALD R
STREET ADDRESS 4803 WESTBURY COURT
CITY-ST-ZIP NEW PORT RICHEY, FL 34655

TITLE D
NAME COTTON, RICKEY
STREET ADDRESS 1319 GLENVIEW LANE
CITY-ST-ZIP LAKELAND, FL 33813

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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: Virginia L. Caraway VIRGINIA L. CARAWAY : 4/22/07 (904) 277-6666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
40083838

PAGE 2 ATTACHMENT TO

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT #N04000012092

1. ENTITY NAME: DSI SUPPORTERS, INC.

4. FEI Number: 20-2446084

10. OFFICERS AND DIRECTORS CONTINUED

TITLE	D
NAME	ENGELS, DAVID I.
STREET ADDRESS	4812 GARFIELD STREET
CITY-ST-ZIP	HOLLYWOOD, FL 33021

TITLE	D
NAME	HOWARD, CONNIE R.
STREET ADDRESS	16550 SW 138 TH AVENUE
CITY-ST-ZIP	ARCHER, FL 32618

TITLE	D
NAME	LUCKE, L. NORDEN
STREET ADDRESS	5922 NW 27 TH STREET
CITY-ST-ZIP	GAINESVILLE, FL 32653