

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08939

FILED
Jan 06, 2009
Secretary of State

Entity Name: JAMES D. RADER, CHAPTER #108, DISABLED AMERICAN VETERANS, DEPARTMENT OF FLORIDA, INCORPORATED

Current Principal Place of Business:

4631 SE 10TH PL
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 100156
CAPE CORAL, FL 339100156 US

New Mailing Address:

FEI Number: 23-7169120 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SIFERT, VICTOR T
1110 SE 16TH STREET
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: KOWALCZYK, JOSEPH
Address: 4520 SKYLINE BLVD APT 201
City-St-Zip: CAPE CORAL, FL 33914

Title: TSD () Delete
Name: SIFERT, VICTOR T
Address: 1110 SE 16TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: PD () Delete
Name: HALEY, ARTHUR O
Address: 2536 SW 9TH PL
City-St-Zip: CAPE CORAL, FL 33914

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PHILLIPS, ROGER G
Address: 2536 SW 9TH PL
City-St-Zip: CAPE CORAL, FL 33914

Title: TD (X) Change () Addition
Name: SIFERT, VICTOR T
Address: 1110 SE 16TH STREET
City-St-Zip: CAPE CORAL, FL 33990

Title: VD (X) Change () Addition
Name: BILLINGTON, SUSAN E
Address: 1118 SE 16TH ST.
City-St-Zip: CAPE CORAL, FL 33990

Title: SD () Change (X) Addition
Name: CONWAY, GERALD A
Address: 208 SW 47TH ST.
City-St-Zip: CAPE CORAL, FL 33914

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTOR SIFERT

TD

01/06/2009

Electronic Signature of Signing Officer or Director

Date