

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11597

FILED
Mar 20, 2009
Secretary of State

Entity Name: DESTROYER-ESCORT SAILORS ASSOCIATION, INC.

Current Principal Place of Business:

2780 REDWING VILLAGE
DELAND, FL 32720 US

New Principal Place of Business:

Current Mailing Address:

2780 REDWING VILLAGE
DELAND, FL 32720 US

New Mailing Address:

FEI Number: 59-1882905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASER, DORI
2780 REDWING VILLAGE
DELAND, FL 32720 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: D () Delete
Name: SAYLOR, SAMUEL
Address: 1810 PINE AVE.
City-St-Zip: WEATHERFORD, OK 73096 US

Title: SD () Delete
Name: WEIDMAN, GEORGE
Address: P O BOX 337
City-St-Zip: DANSVILLE, NY 14437 US

Title: VP () Delete
Name: JOHNSON, EARL
Address: 4249 RUTGERS AVE.
City-St-Zip: LONG BEACH, CA 90808 US

Title: P () Delete
Name: KIDD, THOMAS L
Address: 3636 CHIPSHOT CT.
City-St-Zip: N. FT. MYERS, FL 33917 US

Title: TD () Delete
Name: ZAREM, RONALD
Address: 1310 RIFLE LAKE TR.
City-St-Zip: WEST BRANCH, MI 48661 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: HOBACK, STEVE
Address: 408 KEENE WAY DR.
City-St-Zip: NICHOLASVILLE, KY 40356 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS L. KIDD

P

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date