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FILED

Feb 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N19023 (3)

1. Corporation Name

CHAPTER 65, DISABLED AMERICAN VETERANS, DEPARTME
NT OF FLORIDA, INCORPORATED.

Principal Place of Business

Mailing Address

5325 8TH ST
ZEPHYRHILLS FL 33540
US5325 8TH STREET3
ZEPHYRHILLS FL 33540
US3. Date Incorporated or Qualified
01/30/19873a. Date of Last Report
07/09/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

23-7331152

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ANGEL, EARL H.
4000 WILLIAM HUME DRIVE
ZEPHYRHILLS FL 33541

81 Name

SOEHNLEIN, RALPH J.

82 Street Address (P.O. Box Number is Not Acceptable)

9511 STARLINE DRIVE

83

DADE CITY

84

DADE CITY

FL

85 Zip Code
3352511. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME VANDERLAAN, SAMUEL A.
STREET ADDRESS 6053 HAZELWOOD DR.
CITY-ST-ZIP ZEPHYRHILLS FL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME HAUER, MATT
STREET ADDRESS 6403 NEW YORK ST
CITY-ST-ZIP ZEPHYRHILLS FL2.1 TITLE ☒ Change ☐ Addition
2.2 NAME CRIDER, CLARENCE A.
2.3 STREET ADDRESS 3907 CHAN DRIVE
2.4 CITY-ST-ZIP ZEPHYRHILLS, FL 33541TITLE D ☒ DELETE
NAME JONES, ALBERT
STREET ADDRESS 36152 PRIMROSE LN
CITY-ST-ZIP ZEPHYRHILLS FL3.1 TITLE ☒ Change ☐ Addition
3.2 NAME ORMSBY, PHILLIP W.
3.3 STREET ADDRESS 38703 11th AVE
3.4 CITY-ST-ZIP ZEPHYRHILLS, FL 33540TITLE PC ☒ DELETE
NAME ANGEL, EARL H
STREET ADDRESS 4000 WILLIAM HUME DRIVE
CITY-ST-ZIP ZEPHYRHILLS FL 335414.1 TITLE ☒ Change ☐ Addition
4.2 NAME PC
4.3 STREET ADDRESS SOEHNLEIN, RALPH J.
4.4 CITY-ST-ZIP 9511 STARLINE DRIVETITLE DS ☐ DELETE
NAME CHILDERS, GLADYS
STREET ADDRESS 5410 WATERS ST
CITY-ST-ZIP ZEPHYRHILLS FL 335415.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE VD ☒ DELETE
NAME SOEHNLEIN, RALPH
STREET ADDRESS 9511 STARLINE DRIVE
CITY-ST-ZIP DADE CITY FL 33525-14086.1 TITLE ☒ Change ☐ Addition
6.2 NAME VMCMAINES, JOHN J. JR.
6.3 STREET ADDRESS 40126 PROUD MOCKING BIRD ROAD
6.4 CITY-ST-ZIP ZEPHYRHILLS, FL 3354014. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the
information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gladys L. Childers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GLADYS L. CHILDERS 1/27/97 813-783-7012

Date Daytime Phone # 0078104

CR2E037 (9/96)