2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N19023

1. Entity Name

CHAPTER 65, DISABLED AMERICAN VETERANS, DEPARTMENT OF FLORIDA, INCORPORATED.

Principal Place of Business	Mailing Address
5325 8TH ST ZEPHYRHILLS FL 33542 US	5325 8TH ST ZEPHYRHILLS FL 33542 US

1st MOORE CR2E037 (10/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 23-7331152 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AMERMAN, JAMES C 7138 FORT KING RD ZEPHYRHILLS FL 33541	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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DSVC BRIDGE, JACK P.O. BOX 1240 ZEPHYRHILLS FL 33539	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition U00000482074 04/11/06-80051-008 61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DSVC SMITH, ROY J. 37516 BINGO BLVD. ZEPHYRHILLS FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DTA DUARTE, DONALD A 11019 MUSTANG DRIVE DADE CITY FL 33525	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/C AMERMAN, JAMES C 7138 FT KING ROAD ZEPHYRHILLS FL 33541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/C BRIDGE, JACK E P.O. BOX 1240 ZEPHYRHILLS FL 33539	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/EC RUMLER, JOSEPH F 37829 LAGOON COURT ZEPHYRHILLS FL 33542-1401	☐ 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.

SIGNATURE James C Amerman JAMES C AMERMAN 3/14/06 813-783-76