

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N24251

FILED
Dec 04, 2009
Secretary of State

Entity Name: DISABLED AMERICAN VETERANS AUXILIARY NEW PORT RICHEY, UNIT #78, INC.

Current Principal Place of Business:

6711 JEFFERSON ST
NEW PORT RICHEY, FL 34656 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1301
NEW PORT RICHEY, FL 34656

New Mailing Address:

FEI Number: 59-2295398 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GILLILAND, CHERYL
9401 RICHWOOD LANE
PORT RICHEY, FL 34668 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: CHERYL GILLILAND

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CMD () Delete
Name: GILLILAND, CHERYL
Address: 9401 RICHWOOD LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: SVC () Delete
Name: BEDOR, SANDY
Address: 7265 BROADMOOR DRIVE APT. 5
City-St-Zip: PORT RICHEY, FL 34668

Title: T () Delete
Name: CARNEY, GRETCHEN
Address: 4651 MADISON STREET
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: JVC () Delete
Name: WYATT, DORIS J
Address: 6108 CENTRAL AVE
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: JVC (X) Change () Addition
Name: KIRKE, MARGARET
Address: 7420 SAN SALVADORE DR
City-St-Zip: PORT RICHEY, FL 34668

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: CHERYL GILLILAND

Electronic Signature of Signing Officer or Director

CMD

12/04/2009

Date