

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24408

FILED
Apr 21, 2012
Secretary of State

Entity Name: DISABLED AMERICAN VETERANS, JACKSONVILLE CHAPTER #1, INC.

Current Principal Place of Business:

1439 PARENTAL HOME RD.
JACKSONVILLE, FL 322163007 US

New Principal Place of Business:

Current Mailing Address:

1439 PARENTAL HOME RD.
JACKSONVILLE, FL 322163007 US

New Mailing Address:

FEI Number: 90-0521686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARKIEWICZ, PAUL D
5349 SELTON AVE
JACKSONVILLE, FL 32277 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: CDR
Name: PATIN, FAYE W
Address: 9252 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: SVC
Name: YOUNG, ROBERT
Address: 2420 COOL SPRINGS DR S
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: ADJ
Name: DIFFENBAUGH, GUY L
Address: 4469 BAY HARBOUR DRIVE
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: JVC
Name: ARCENEAUX, RICHARD
Address: 10790 JAVA DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: TREA
Name: MARKIEWICZ, PAUL D
Address: 5349 SELTON AVE
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: JVC
Name: ISON, CHARLES
Address: 3221 DONHURST ST
City-St-Zip: JACKSONVILLE, FL 32277 US

I hereby 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 all other like empowered.

SIGNATURE: PAUL D MARKIEWICZ

TREA

04/21/2012

Electronic Signature of Signing Officer or Director

Date