2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # N27100** Aug 21, 2000 8:00 am Secretary of State 1. Entity Name CHAPTER #110, DISABLED AMERICAN VETERANS, DEPART 08-21-2000 90214 019 ****61.25 Principal Place of Business Mailing Address C.E.,L. CHURCH PO BOX 1355 5309 U.S. HIGHWAY 41 RIVERVIEW FL 33569 APOLLO BEACH FL 33572 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) WAREHIME REASON F 10723 BURRITO DR RIVERVIEW, FL 33569 City 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) 8-20 15-12-FILE NOW: FEE,IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees After September 13, 2000 min. will be \$236.25 **Department of State** · · · · OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. X Delete XX Addition ρ ☐ Change TITLE TITLE JENNINSON, ROBERT D NAME NAME Al Edwards STREET ADDRESS 906 W MCGEE RD STREET ADDRESS 710 Thunderbird Dr. CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL <u>Sun City Center Fl.</u> XX Addition ☐ Delete TITLE ☐ Change TITLE HILTON, JAMES E NAME NAME William J. McCracken STREET ADDRESS STREET ADDRESS 744 OCEANSIDE CT 3705 Gaviota Dr. CITY-ST-ZIP CITY-ST-ZIP RUSKIN FL 33570 Ruskin, Fl. 33573 Addition ☐ Change TITLE ☐ Delete TITI F FAULKNER; BUSTER E-NAME: NAME STREET ADDRESS STREET ADDRESS 2027 SARAH LOUISE DR CITY-ST-ZIP CITY-ST-ZIP **BRANDON FL** ☐ Change ☐ Addition TITLE Delete TITI F WAREHIME, REASON F NAME NAME STREET ADDRESS STREET ADDRESS 10723 BURRITO DRIVE CITY-ST-ZIP CITY-ST-ZIP RIVERVIEW FL Addition ☐ Change ☐ Delete TITLE TITLE SNYDER, RICHARD B NAME STREET ADDRESS STREET ADDRESS 2017 EL RANCHO DR CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER FL 33573 X X Delete Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

RULEY, LAWRENCE D

VALRICO FL 33594

827 WALSINGHAM WAY

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Change