

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N30681

1. Entity Name

ORANGE BLOSSOM GARDENS CHAPTER 150, DISABLED AMERICAN VETERANS, INCORPORATED

Principal Place of Business

1403 PARADISE DRIVE  
OBG RECREATION COMPLEX  
LADY LAKE FL 32159

Mailing Address

832 TARRSON BLVD.  
LADY LAKE FL 32158

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

1203 GRANADA CT

Suite, Apt. #, etc.

LADY LAKE

City & State

FLORIDA

Zip 32159

Country LAKE



DO NOT WRITE IN THIS SPACE

4. FEI Number 31-1216257

Applied For  
Not Applicable

5. Certificate of Status Desired

Additional Fee Required \$8.75

6. Name and Address of Current Registered Agent

SIEVERS, HAROLD  
610 ST ANDREWS I  
LADY LAKE FL 32159

7. Name and Address of New Registered Agent

Name JAMES P. WHITNEY  
Street Address (P.O. Box Number is Not Acceptable)  
1203 GRANADA COURT

City LADY LAKE, FL Zip Code 32159

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

JAMES P. WHITNEY, ADJUTANT TREASURER

6/1/02  
DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE	DJVC	<input checked="" type="checkbox"/> Delete
NAME	WORCH, ROBERT W.	
STREET ADDRESS	530 CHULA VISTA AVE.	
CITY-ST-ZIP	LADY LAKE FL 32159	
TITLE	DSVC	<input checked="" type="checkbox"/> Delete
NAME	JACKSON, MARVIN E.	
STREET ADDRESS	919 TARRSON BLVD	
CITY-ST-ZIP	LADY LAKE FL 32159	
TITLE	DA	<input checked="" type="checkbox"/> Delete
NAME	RITTER, THOMAS H	
STREET ADDRESS	832 TARRSON BLVD.	
CITY-ST-ZIP	LADY LAKE FL 32159	
TITLE	DIPC	<input type="checkbox"/> Delete
NAME	WHITNEY, JAMES P	
STREET ADDRESS	1203 GRANADA CT	
CITY-ST-ZIP	LADY LAKE FL 32159	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	COMMANDER	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHARLES ROGERS	
STREET ADDRESS	721 EAMELIA CT	
CITY-ST-ZIP	LADY LAKE, FL. 32159	
TITLE	SR. VICE COMMANDER	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NORMAN HOLKINGHORN	
STREET ADDRESS	2608 BOTELLO AVE	
CITY-ST-ZIP	LADY LAKE, FL 32162	
TITLE	3 YEAR TRUSTEE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FRANK MINGUS	
STREET ADDRESS	1441 W. SCHWARZ BLVD	
CITY-ST-ZIP	LADY LAKE, FL 32159	
TITLE	ADJUTANT/TREASURER	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JAMES P. WHITNEY	
STREET ADDRESS	1203 GRANADA CT.	
CITY-ST-ZIP	LADY LAKE, FL 32159	
TITLE	2 YEAR TRUSTEE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT BAKWELL	
STREET ADDRESS	1013 PARKER PLACE	
CITY-ST-ZIP	LADY LAKE, FL 32159	
TITLE	1 YEAR TRUSTEE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HAROLD SIEVERS	
STREET ADDRESS	610 ST. ANDREWS BLVD	
CITY-ST-ZIP	LADY LAKE, FL 32159	

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.

SIGNATURE:

JAMES P. WHITNEY, ADJUTANT/TREASURER

Date

Daytime Phone #

0059440

CR2E037 (9/01)