

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 23 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N31821 (4)

1. Corporation Name

DISABLED AMERICAN VETERANS AUXILIARY, GREATER DAYTONA UNIT 84, INC.

Principal Place of Business

Mailing Address

605 8TH STREET
HOLLY HILL FL 32117605 8TH STREET
HOLLY HILL FL 32117-33713. Date Incorporated or Qualified
04/20/19893a. Date of Last Report
05/21/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

23-7331161

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OLSEN, ANNA S.
1133 GOLFVIEW DR.
DAYTONA BEACH FL 32119

81 Name

DEERY, SHELLEY

82 Street Address (P.O. Box Number is Not Acceptable)

83

289 SOUTH JANICE LN.

84 City

ORMOND BEACH

FL

85 Zip Code
32174

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

(SHELLEY DEERY, CMDR.)

1/13/97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE C ☒ DELETE
NAME OLSEN, ANNA S.
STREET ADDRESS 1133 GOLFVIEW DR.
CITY-ST-ZIP DAYTONA BEACH FL 321191.1 TITLE C ☒ Change ☐ Addition
1.2 NAME DEERY, SHELLEY
1.3 STREET ADDRESS 289 SOUTH JANICE LN.
1.4 CITY-ST-ZIP ORMOND BEACH, FL 32174TITLE SRVC ☒ DELETE
NAME DEERY, SHELLEY
STREET ADDRESS 289 S. JANICE LANE
CITY-ST-ZIP ORMOND BEACH FL 321142.1 TITLE SRVC ☒ Change ☐ Addition
2.2 NAME MCMILLEN, LINDA
2.3 STREET ADDRESS RTE. 1, BOX 35
2.4 CITY-ST-ZIP BUNNELL, FL 32110TITLE VD ☒ DELETE
NAME SWEENEY, HELEN B
STREET ADDRESS 2 ROCK COVE CT
CITY-ST-ZIP DAYTONA BEACH FL3.1 TITLE VD ☒ Change ☐ Addition
3.2 NAME MCMILLEN, MARGARET
3.3 STREET ADDRESS 301 E. HOWE ST.
3.4 CITY-ST-ZIP BUNNELL, FL 32110TITLE T ☐ DELETE
NAME FORSTER, HELEN
STREET ADDRESS 1000 WALKER / STE - 292
CITY-ST-ZIP HOLLY HILL FL4.1 TITLE T ☐ Change ☐ Addition
4.2 NAME FORSTER, HELEN
4.3 STREET ADDRESS 1000 WALKER ST./LOT 292 (CORRECTED)
4.4 CITY-ST-ZIP HOLLY HILL, FL 32117TITLE SD ☐ DELETE
NAME CERVIZZI, CHRISTINE
STREET ADDRESS 3 PARADISE FALLS CIR
CITY-ST-ZIP ORMOND BEACH FL5.1 TITLE SD ☐ Change ☐ Addition
5.2 NAME CERVIZZI, CHRISTINE
5.3 STREET ADDRESS 3 PARADISE FALLS CIR.
5.4 CITY-ST-ZIP ORMOND BEACH, FL 32174 (CORRECTED)TITLE PD ☒ DELETE
NAME GUTHRIE, MILDRED
STREET ADDRESS 1558 DAYTONA AVE
CITY-ST-ZIP HOLLY HILL FL6.1 TITLE PD ☒ Change ☐ Addition
6.2 NAME OLSEN, ANNA S.
6.3 STREET ADDRESS 1133 GOLFVIEW DR.
6.4 CITY-ST-ZIP DAYTONA BEACH, FL 32119

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Helen Forster

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR HELEN FORSTER 1/13/97 (904) 239-0062

CR2E037 (9/96)