## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Jul 17, 2008 8:00 am Secretary of State

DOCUMENT # N33380  1. Entity Name DAV - BEE RIDGE CHAPTER 97, INC.								07	7-17-2008 90	0062 045 ****61	1.25	
Principal Place of Business 7177 BEE RIDGE ROAD SARASOTA, FL 34241 US			717	Mailing Address 7177 BEE RIDGE ROAD SARASOTA, FL 34241 US				1	# 	BIL BIBIL BIBIL B1811 81814 8181	<b>e</b> (ii) <b>e</b> l 40 <b>e</b> l	
2. Principal Place of Business - No P.O. Box # 3. M.				. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				07152008 CI	ng-NP	CR2E037 (12/06)		
City & State			Ci	City & State				4. FEI Number 59-213810	0	<del></del>	pplied For lot Applicable	
Zip						untry	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Age								7. Name and Add	ress of New Reg	istered Agent		
EAGEN ADHN 7177 BEE-RIDGE ROAD SARASOTA, FL 34241						7	7 (	O. Box Number is 1	A.	OGE	P)	
8. The above named entity (Marrits this statement for the num								ARASOFA FL Zig-Code 24				
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATURE												
SIGNATURE  Signature, and or printed name of registered agent and lifte if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
Filing Fee is \$61.25  Due by September 12, 2008  9. Election Campaigr Trust Fund Contrib								\$5.00 May Be Added to Fees		ke check payable to a Department of S		
10.		OFFICERS AND	DIRECTORS		11.		A	DDITIONS/CHANG	ES TO OFFICERS	AND DIRECTORS II	V 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		OHN MPTON AVE. FA, FL 34235		<b>Do</b> jete			3	658	mn R		Addition	
TITLE NAME STREET ADDRESS	SVP PISCIOTT			☐ Delete	TITLI		5/0/3	HN DE	572F	AND CHANGE	Addition	
CITY-ST-ZIP		TA, FL 34241		·		-ST-ZIP	30		o TA.		23.3	
TITLE NAME	1STV SWIER, R			☐ Delete	TITL! NAM	R	r e	HARD	. Stul 18	CR Eschange	Addition	
STREET ADDRESS CITY-ST-ZIP	ľ	EO CASTILLE 「A, FL 34238				ET ADDRESS G -ST-ZIP	ر کر ہ ان کی ر	ALASO.	in fr	3423	s-	
TITLE NAME STREET ADDRESS	5398 CHR	ANO, JOHN RISINE ANN PL.	N/n	Delete	TITLE NAM STRE	E E ET ADDRESS			2467	STILL STANSE	Addition	
CITY-ST-ZIP	SARASO1	ΓA, FL 34233		☐ Delete				VMC	. 4-10 1			
NAME				L. Delete	TITLE NAM					☐ Change	☐ Addition	
STREET ADDRESS City-St-Zip						ET ADDRESS -ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		E Et adoress				☐ Change	Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 encouvered.												