

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 22 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Northam**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **N41202** (5)

1. Corporation Name

**SOUTHEASTERN CHAPTER, 88TH INFANTRY DIVISION ASSOCIATION, INC.**

Principal Place of Business

**8625 SEACREST DR  
D  
VERO BCH FL 32963-9609  
US**

Mailing Address

**8625 SEACREST DR  
VERO BCH FL 32963-9606  
US**



3. Date Incorporated or Qualified  
**12/10/1990**

3a. Date of Last Report  
**02/29/1996**

2. Principal Place of Business

**21**  
Suite, Apt. #, etc.

**22**  
City & State

**23**  
Zip

**25**  
Country

2a. Mailing Address

**26**  
Suite, Apt. #, etc.

**27**  
City & State

**29**  
Zip

**30**  
Country

4. FEI Number

**59-3050969**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

8. 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

**PALMA, ANTHONY M.  
8625 SEACREST DR  
VERO BCH FL 32963**

**81** Name

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

**83**

**84** City

**FL**

**85** Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE  
NAME **GREENE, ALBERT V., MAJ.**  
STREET ADDRESS **507 S. LAKEMONT AVENUE**  
CITY-ST-ZIP **WINTER PARK FL**

TITLE **D** ☒ DELETE  
NAME **DUCKWORTH, EVERETT, MAJ.**  
STREET ADDRESS **1220 MOHAWK DRIVE**  
CITY-ST-ZIP **PORT CHARLOTTE FL 33952-1208**

TITLE **TD** ☐ DELETE  
NAME **PALMA, ANTHONY M.**  
STREET ADDRESS **8625 SEACREST DR**  
CITY-ST-ZIP **VERO BCH FL 32963-9609**

TITLE **SD** ☐ DELETE  
NAME **SHEWBRIDGE, KARL**  
STREET ADDRESS **19 BARTON AVENUE, #14**  
CITY-ST-ZIP **ROCKLEDGE FL 32955-2255**

TITLE **VD** ☒ DELETE  
NAME **PHILLIPS, GEORGE W.**  
STREET ADDRESS **306 MCRAE ST**  
CITY-ST-ZIP **LAURINBURG NC**

TITLE **PD** ☐ DELETE  
NAME **SHELL, JOHN B**  
STREET ADDRESS **2735 VALVEDERE DRIVE, NE**  
CITY-ST-ZIP **ATLANTA GA 30319-3262**

1.1 TITLE **VD** ☐ Change ☒ Addition  
1.2 NAME **GOFF, JOHN E**  
1.3 STREET ADDRESS **152 HARRIS ST**  
1.4 CITY-ST-ZIP **MCDONOUGH GA 30263-2136**

2.1 TITLE **D** ☐ Change ☒ Addition  
2.2 NAME **DELOACH JAMES W**  
2.3 STREET ADDRESS **6808 EAST BROAD RD.**  
2.4 CITY-ST-ZIP **COLUMBIA SC 29206-2212**

3.1 TITLE **D** ☐ Change ☒ Addition  
3.2 NAME **HEMENWAY DON**  
3.3 STREET ADDRESS **7805 KLOVETAD DRIVE**  
3.4 CITY-ST-ZIP **FORT WASHINGTON MD. 20744-1728**

4.1 TITLE **D** ☐ Change ☒ Addition  
4.2 NAME **HAUT, CHARLES C**  
4.3 STREET ADDRESS **7710 DELPHIA ST.**  
4.4 CITY-ST-ZIP **ORLANDO FL 32807-8136**

5.1 TITLE **D** ☐ Change ☒ Addition  
5.2 NAME **SCHULZ RON**  
5.3 STREET ADDRESS **1200 SW 130TH G-204**  
5.4 CITY-ST-ZIP **PEMBROKE PINES FL 33027-2137**

6.1 TITLE **D** ☐ Change ☒ Addition  
6.2 NAME **KUNZE JOHN**  
6.3 STREET ADDRESS **ROUTE 4 BOX 176 "MA"**  
6.4 CITY-ST-ZIP **COMMERCE GA. 30629-9423**

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:

**Anthony M. Palma** **Anthony M. Palma TD** **1/3/97** **521-388 3690**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0020013

CR2E037 (9/96)

# SOUTHEASTERN CHAPTER 88<sup>th</sup> INFANTRY DIVISION ASSOCIATION INC

Prepared By	Initials	Date
Approved By		

MADE IN U.S.A.

<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>																					
7.1	Title	D AZZARA ANTHONY C 3610 LONG TRAIL COURT NORT FT. MYERS FL 33917-7226																			
7.2	Name																				
7.3	Street Address																				
7.4	City ST ZIP																				
8.1	Title	D SPINO GEORGE P.O. BOX 4089 "NIA" CLEARWATER FL 34618-4284																			
8.2	Name																				
8.3	Street Address																				
8.4	City ST ZIP																				
<p>In addition to the above, all past presidents serve on the Board of Directors:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: center; border-bottom: 1px solid black;">Name</th> <th style="width: 50%; text-align: center; border-bottom: 1px solid black;">Address</th> </tr> </thead> <tbody> <tr> <td>Sol Felaman</td> <td>3874 Avenida Dr. West Palm Beach FL 33417</td> </tr> <tr> <td>Al. Greene</td> <td>507 S. Lakemont Ave. Winter Park FL 32792</td> </tr> <tr> <td>Roy Lee</td> <td>Box 507 Summerfield FL 32786 "NIA"</td> </tr> <tr> <td>Don Luby</td> <td>4606 Gregory Dr. Columbus GA 31907</td> </tr> <tr> <td>Paul Osos</td> <td>416 21<sup>st</sup> St. N. Beach St. Augustine FL 32076</td> </tr> <tr> <td>Milton Priest</td> <td>22 Lanyon 2 Beach Dr. Loxley GA 30650</td> </tr> <tr> <td>Dante Salomone</td> <td>5225 Dahlia Pkwy Rd. St. Augustine FL 32086</td> </tr> </tbody> </table>						Name	Address	Sol Felaman	3874 Avenida Dr. West Palm Beach FL 33417	Al. Greene	507 S. Lakemont Ave. Winter Park FL 32792	Roy Lee	Box 507 Summerfield FL 32786 "NIA"	Don Luby	4606 Gregory Dr. Columbus GA 31907	Paul Osos	416 21 <sup>st</sup> St. N. Beach St. Augustine FL 32076	Milton Priest	22 Lanyon 2 Beach Dr. Loxley GA 30650	Dante Salomone	5225 Dahlia Pkwy Rd. St. Augustine FL 32086
Name	Address																				
Sol Felaman	3874 Avenida Dr. West Palm Beach FL 33417																				
Al. Greene	507 S. Lakemont Ave. Winter Park FL 32792																				
Roy Lee	Box 507 Summerfield FL 32786 "NIA"																				
Don Luby	4606 Gregory Dr. Columbus GA 31907																				
Paul Osos	416 21 <sup>st</sup> St. N. Beach St. Augustine FL 32076																				
Milton Priest	22 Lanyon 2 Beach Dr. Loxley GA 30650																				
Dante Salomone	5225 Dahlia Pkwy Rd. St. Augustine FL 32086																				