

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43536

FILED  
Jan 15, 2007  
Secretary of State

**Entity Name:** DISABLED AMERICAN VETERANS, CHARLES GUSTAFSON CHAPTER NO. 94, INC.

**Current Principal Place of Business:**

206 TREE SWALLOW CT  
LEHIGH ACRES, FL 33936 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 667  
LEHIGH ACRES, FL 339700851 US

**New Mailing Address:**

**FEI Number:** 23-7040156

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

D'ANGELO, LAWRENCE J  
206 TREE SWALLOW CT  
LEHIGH ACRES, FL 33936 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DST ( ) Delete  
Name: D'ANGELO, LAWRENCE J  
Address: 206 TREE SWALLOW CT  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: PD ( ) Delete  
Name: MARTMAN, ERNIE F  
Address: 28 COSMOPOLITAN DR, UNIT 13  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: DE ( ) Delete  
Name: KENNEDY, EARL W  
Address: 817 COLUMBUS AVE  
City-St-Zip: LEHIGH ACRES, FL 33972

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: HARTMAN, ERNIE F  
Address: 28 COSMOPOLITAN DR, UNIT 13  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAWRENCE J. D'ANGELO

DST

01/15/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date