

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46795

FILED
Apr 10, 2009
Secretary of State

Entity Name: DISABLED AMERICAN VETERANS AUXILIARY SUWANNEE MEMORIAL # 126 INC.

Current Principal Place of Business:

DAVA OFFICE
LIVE OAK, FL 32060 US

New Principal Place of Business:

226 PARSHLEY ST SW
LIVE OAK, FL 32064 US

Current Mailing Address:

226 PARSHLEY ST.
LIVE OAK, FL 32060 US

New Mailing Address:

226 PARSHLEY ST
LIVE OAK, FL 32064 US

FEI Number: 51-0183078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMULLEN, SUSIE L.
1115 SW BLACKBURN
LIVE OAK, FL 32060 US

Name and Address of New Registered Agent:

SMITH, ANNIE A
9095 137TH RD
LIVE OAK, FL 32060 US

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: ANNIE A. SMITH

04/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: CREWS, BONNIE
Address: 9095 137TH RD
City-St-Zip: LIVE OAK, FL 32060

Title: DT () Delete
Name: TAYLOR, FERN
Address: 11533 24TH ST
City-St-Zip: LIVE OAK, FL 32060

Title: PC () Delete
Name: SMITH, ANNIE A
Address: 9095 137TH RD
City-St-Zip: LIVE OAK, FL 32060

Title: DS () Delete
Name: MCMULLEN, SUSIE L
Address: 1115 SW BLACK BURN
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: DEPASS, DOROTHY
Address: 1224 IRVIN AVE
City-St-Zip: LIVE OAK, FL 32060

Title: D () Delete
Name: CHILDRESS, RUTH
Address: 1007 SUWANNEE AVE
City-St-Zip: LIVE OAK, FL 32060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: CREWS, BONNIE A
Address: 9095 137TH RD
City-St-Zip: LIVE OAK, FL 32060 US

Title: DT (X) Change () Addition
Name: SMITH, ANNIE A
Address: 9095 137TH RD
City-St-Zip: LIVE OAK, FL 32060 US

Title: D (X) Change () Addition
Name: DUKE, SALLY
Address: 18173 10TH TR
City-St-Zip: LIVE OAK, FL 32060 US

Title: D (X) Change () Addition
Name: MILLER, MARILYN D
Address: 11492 SE 50TH DR
City-St-Zip: JASPER, FL 32052 US

Title: D (X) Change () Addition
Name: DEPASS, DOROTHY
Address: 311 WOODD AV SW
City-St-Zip: LIVE OAK, FL 32064 US

Title: D (X) Change () Addition
Name: CHILDRESS, RUTH
Address: 1007 SUWANNEE AVE
City-St-Zip: LIVE OAK, FL 32064 US

I hereby certify that the information supplied with this filing does not qualify 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: ANNIE A. SMITH

DT

04/10/2009

Electronic Signature of Signing Officer or Director

Date