

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N47613 (7)

1. Corporation Name

CLARENCE W. BYERS SR. CHAPTER #83, DISABLED AMERICAN VETERANS, DEPARTMENT OF FLORIDA, INCORPORATED



Principal Place of Business

409 N MOON ST.
BRANDON FL 33510

Mailing Address

409 N MOON ST.
BRANDON FL 33510

3. Date Incorporated or Qualified
03/02/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-6196139

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$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

BRODERICK, JOSEPH F
1901 BELL SHOALS DR
BRANDON FL 33511

10. Name and Address of New Registered Agent

81

Name

MEREDITH, JOHN R.

82

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

208 LAKE PARSONS GRW #801

83

84

City

BRANDON

FL

85

Zip Code

33511

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

John R. Meredith

D/T

JOHN R. MEREDITH

4 MAR 1996

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P

BRODERICK, JOSEPH F
1901 BELL SHOALS RD
BRANDON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D

ANDERSON, MARTIN
3111 FAIRLEA LANE
VALRICO FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D

MURPHY, WALLACE
P.O. BOX 706N/A
BRANDON FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D

ANDERSON, KENNETH
201 WEST LAUREL ST, UNIT 308
TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

P

ANDERSON, MARTIN
3111 FAIRLEA LANE
VALRICO, FL. 33594

☐ Change

☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

D-5

ANDERSON, MARTIN
3111 FAIRLEA LANE
VALRICO, FL. 33594

☒ Change

☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

D-T

JOHN R. MEREDITH
208 LAKE PARSONS GRW #801
BRANDON, FL. 33511

☒ Change

☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

D

☐ Change

☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change

☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

John R. Meredith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4 March 1996

Date

(813) 684-5914

Daytime Phone #

CR2E037 (12/95)