2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51404

FILED Jan 16, 2009 Secretary of State

Entity Name: 82ND AIRBORNE DIVISION ASSOCIATION, GREATER DAYTONA CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business: 125 CLEO LANE SATSUMA, FL 321892204 US **Current Mailing Address: New Mailing Address:** 125 CLEO LANE SATSUMA, FL 321892204 US FEI Number: 59-2882886 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BABB, BILLY J 125 CLEO LANE SATSUMA, FL 321892204 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BABB, BILLY J Name: Name: 125 CLEO LANE Address: Address: City-St-Zip: SATSUMA, FL 321892204 US City-St-Zip: Title: CD () Delete Title: (X) Change () Addition KAIDEN, LOUIS E Name: KAIDEN, LOUIS E Name: Address: 10010 BELLE RIVE BL APT 1209 Address: 10010 BELLE RIVE BL APT 1209 City-St-Zip: JACKSONVILLE, FL 322569527 US City-St-Zip: JACKSONVILLE, FL 322569527 US Title: TD () Delete Title: CD (X) Change () Addition CLARK, GENE R CLARK, GENE R Name: Name: 172 BECKY DRIVE 172 BECKY DRIVE Address: Address: City-St-Zip: PORT ORANGE, FL 321292407 US City-St-Zip: PORT ORANGE, FL 321292407 US Title: VD () Delete Title: () Change () Addition BUMB, JEFFREY L Name: Name: 2725 S PENINSULA DR Address: Address: City-St-Zip: DAYTONA BEACH, FL 321185705 US City-St-Zip: Title: () Delete Title: (X) Change () Addition JOE, KEENAN J Name: Name: JOE, KEENAN J 118 ANASTASIA LODGE DRIVE 118 ANASTASIA LODGE DRIVE Address: Address: ST AUGUSTINE, FL 320805943 US City-St-Zip: City-St-Zip: ST AUGUSTINE, FL 320805943 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: JOE KEENAN TD 01/16/2009