

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000002657

1. Entity Name

DISABLED AMERICAN VETERANS (DAV) CHAPTER #3, INC

**FILED**  
**Apr 20, 2000 8:00 am**  
**Secretary of State**

04-20-2000 90110 002 \*\*\*\*61.25

Principal Place of Business

Mailing Address

2445 FRUITVILLE RD  
SARASOTA FL 34237  
US

P O BOX 915  
SARASOTA FL 34230-0915

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6196572

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MANN, DONALD  
4212 CHARDON WAY  
SARASOTA FL 34232

Name

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

City

FL

Zip Code

8. 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 DONALD MANN

*Donald Mann*

4/12/2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TS ☐ Delete  
NAME MANN, DONALD  
STREET ADDRESS 2445 FRUITVILLE RD  
CITY-ST-ZIP SARASOTA FL 34237

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME THOMPSON, DONALD  
STREET ADDRESS 2445 FRUITVILLE RD  
CITY-ST-ZIP SARASOTA FL 34237

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME MOONEY, RICHARD  
STREET ADDRESS 2445 FRUITVILLE RD  
CITY-ST-ZIP SARASOTA FL 34237

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME CINTRON, RAMON  
STREET ADDRESS 2445 FRUITVILLE ROAD  
CITY-ST-ZIP SARASOTA FL 34237

TITLE ☒ Change ☐ Addition  
NAME SERVICE COMMANDER  
STREET ADDRESS SPRAIN, BAYLESS B  
CITY-ST-ZIP 2845 SAVOY DR.  
SARASOTA, FL. 34232

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD MANN *Donald Mann*

4/12/00 (941) 371-8767

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)