

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jul 15, 2004 8:00 am**  
**Secretary of State**

07-15-2004 90007 043 \*\*\*\*61.25

**DOCUMENT # N99000001472**

1. Entity Name

**THE ZEPHYRHILLS FLORIDA UNIT 65, DAVA  
CORPORATION**



Principal Place of Business

**5325 8TH STREET  
ZEPHYRHILLS FL 33542**

Mailing Address

**5325 8TH STREET  
ZEPHYRHILLS FL 33542**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**23-7331152**

Applied For

Not Applicable

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

**AMERMAN, MINNIE F  
7138 FORT KING ROAD  
ZEPHYRHILLS FL 33541**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Minnie F. Amerman Commander DAVA*

*7-12-04*

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  
Due By September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**T  
AMERMAN, MINNIE F  
7138 FORT KING ROAD  
ZEPHYRHILLS FL 33541**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
DAWN, IOLA  
4901 GARDEN STREET  
ZEPHYRHILLS FL 33541**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**Senior Vice  
Blacky (Bernie) Christensen  
3754 Anna Maria Lane  
Zephyrhills FL 33541**

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
BARGUS, FRANCES J  
5335 6TH STREET  
ZEPHYRHILLS FL 33542**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**Junior Vice  
Iola Dawn  
4901 Garden ST  
Zephyrhills FL 33541**

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**S  
RUSSELL, LENA KAY  
39732 MEDICINE BOW DRIVE  
ZEPHYRHILLS FL 33542**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**Treasury/adjutant  
Geraldine Boutan  
5325 8th ST  
Zephyrhills FL 33542**

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
SULLIVAN, GERALDINE  
4708 GOLD FINCH DRIVE  
ZEPHYRHILLS FL 33541**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
SCARFORD, LILLIAN  
38544 CALVIN AVENUE  
ZEPHYRHILLS FL 33542**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:** *Minnie F. Amerman*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*7-12-04*

Date

*813-788-7228*

Daytime Phone #