

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 07, 2006 8:00 am
Secretary of State

02-20-2006 90054 037 *****8.75
03-07-2006 90015 021 *****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

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

50001235

1st MOORE CR2E037 (10/05)

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

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

7. Name and Address of New Registered Agent

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 DATE 2-8-06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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-STATE-ZIP	T AMERMAN, MINNIE F 7138 FORT KING ROAD ZEPHYRHILLS FL 33541 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SV CHRISTENSEN, GLADYS 37544 ANNA MARIA LANE ZEPHYRHILLS FL 33541 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SV (Hays) OWENS, Carolyn (Carole) 4402 Holiday Dr Spring Hill FL 34608 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	JV DAWN, IOLA 4901 GARDEN ST ZEPHYRHILLS FL 33541 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Christensen, Gladys (Bernie) 37544 Anna Maria Lane Zephyrhills FL 33541 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TA KRUGER, OLIVE P.O. BOX 2198 ZEPHYRHILLS FL 33539 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Therese (adjutant) DeLore (Dale) Bellingham 11187 Bethaville Rd Spring Hill FL 34608 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 DATE: 2-8-06 813-783-7012

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



ATTACHMENT

5000/235-

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2006

THE ZEPHYRHILLS FLORIDA UNIT 65, DAVA CORPORATION
5325 8TH STREET
ZEPHYRHILLS, FL 33542

Subject: THE ZEPHYRHILLS FLORIDA UNIT 65, DAVA CORPORATION

Reference Number:

N99000001472

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$8.75; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed nonprofit annual report/uniform business report is \$61.25. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$52.50.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/MH

ANNUAL REPORTS SECTION

ATTACHMENT
50001235
#N99000001472

3-B-06

My apologies for the error
when this was done I was under
doctor care and my thinking was
not to clear.

Sorry for any inconvenience
it caused your department.

Enclosed is one check for \$1.25
for a certificate of status also.

My adjutant is out of town at
this time so I'm filling in.
Hope this clears this up.

Thank you

Sincerely

Minna F. Amerman