

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735463

Entity Name: CENTRAL FLORIDA CHAPTER 16, DISABLED AMERICAN VETERANS, INCORPORATION**Current Principal Place of Business:**4444 EDGEWATER DRIVE
ORLANDO, FL 32804**Current Mailing Address:**PO BOX 916643
LONGWOOD, FL 32791 US**FEI Number:** 59-6196589**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSE, LAYMOND
2956 MAJESTIC ISLE DR.
CLERMONT, FL 34711 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:** LAYMOND ROSE

01/23/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	COMMANDER
Name	ROSE, LAYMOND
Address	PO BOX 916643
City-State-Zip:	LONGWOOD FL 32791

Title	TREASURER
Name	JOYNER, DENNIS
Address	PO BOX916643
City-State-Zip:	LONGWOOD FL 32791

Title	SENIOR VICE COMMANDER
Name	NOCKS, JAMES
Address	PO BOX 916643
City-State-Zip:	LONGWOOD FL 32791

Title	JUDGE ADVOCATE
Name	DUNCAN, LISA
Address	PO BOX 916643
City-State-Zip:	LONGWOOD FL 32791

I hereby 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 all other like empowered.

SIGNATURE: DENNIS JOYNER

TREASURER

01/23/2022

Electronic Signature of Signing Officer/Director Detail

Date