

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montan
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # 753335 (9)

1. Corporation Name

SEBRING MEMORIAL POST 4300 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

65 MAY - 1 JUN 9:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
2011 S.E. LAKEVIEW DRIVE
PO BOX 127
SEBRING FL 33871-0127

3. Date Incorporated or Qualified 07/15/1980
3a. Date of Last Report 04/29/1994
4. FEI Number 59-0587047
Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc 26 Suite, Apt. #, etc
22 City & State 27 City & State
23 Zip 28 Zip Country 29 Zip Country
24 25 29 30

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LUTHRINGER, JOHN A.
6614 6TH AVE. W.
SEBRING FL 33870

10. Name and Address of New Registered Agent

81 Name DUBIN, EDMUND D.
82 Street Address (P.O. Box Number is Not Acceptable) 5330 WATERWAY DR.
83 Sebring, FL 33872
84 City Sebring FL 85 Zip Code 33872

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Edmund D. Dubin

Signature (Typed or printed name of registered agent and fee if applicable)

(If 10. Registered Agent signature required other than Secretary)

3/4/95

12. OFFICERS AND DIRECTORS

1. TITLE PDC
2. NAME BENNETT, JAMES W.
3. STREET ADDRESS 125 LIME ST., N.E.
4. CITY, ST, ZIP PLACID LAKES FL
1. TITLE VSD
2. NAME TACK, TRIPHON J.
3. STREET ADDRESS 16 SEAHORSE DRIVE
4. CITY, ST, ZIP SEBRING FL
1. TITLE DT
2. NAME KILPATRICK, MARVIN E.
3. STREET ADDRESS 210 QUAIL AVENUE
4. CITY, ST, ZIP SEBRING FL
1. TITLE DT
2. NAME REESE, ALLEN C.
3. STREET ADDRESS 308 CENTRAL AVENUE
4. CITY, ST, ZIP FROSTPROOF FL
1. TITLE DT
2. NAME ROHDENBERG, HANS
3. STREET ADDRESS 1812 THEON AVENUE
4. CITY, ST, ZIP SEBRING FL
1. TITLE O
2. NAME DUBIN, EDMUND D.
3. STREET ADDRESS 5330 W. WATERWAY DRIVE
4. CITY, ST, ZIP SEBRING FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ABC ☒ Change ☐ Addition
1.2 NAME TACK, TRIPHON J.
1.3 STREET ADDRESS 16 Seahorse Dr.
1.4 CITY, ST, ZIP Sebring, FL 33872
2.1 TITLE VSD ☐ Change ☒ Addition
2.2 NAME STONE, George Jr.
2.3 STREET ADDRESS 1918 Beach Dr.
2.4 CITY, ST, ZIP Sebring, FL 33870-1703
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 115.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Edmund D. Dubin
EDMUND D. DUBIN

3/4/95

385-8902