

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

FILED
Aug 29, 2006 8:00 am
Secretary of State

08-29-2006 90002 012 ****70.00



DOCUMENT-# N31908

1. Entity Name

**RANDOLPH FORD POST NO. 7845 VETERANS OF
FOREIGN WARS OF THE UNITED STATES, INC.**

Principal Place of Business

6315 STONE RD
NEW PORT RICHEY FL 34654

Mailing Address

6315 STONE ROAD
PORT RICHEY FL 34668
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/06)

4. FEI Number

59-2912271

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

WINDERS, CHARLES
8732 COCHISE LANE
PORT RICHEY FL 34668

Name

MICHAEL D. REMBISZ

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

9036 ROBERT AVE

City

PORT RICHEY

FL

Zip Code

34668

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

Michael D Rembysz -- QUARTERMASTER

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

(NOTE: Registered Agent signature required when reinstating)

8/24/06

DATE

**FILE NOW: FEE IS \$61.25
Due By September 6, 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

TITLE: TR
NAME: WILCOX, WAYNE Delete
STREET ADDRESS: 7431 GRANADA AVE.
CITY-ST-ZIP: NEW PORT RICHEY FL 34653

TITLE: TR
NAME: VELIKO, FRANK Delete
STREET ADDRESS: 7742 RADCLIFF CIR
CITY-ST-ZIP: PORT RICHEY FL 34668

TITLE: TR
NAME: SOBEK, PAUL Delete
STREET ADDRESS: 7241 FIRESIDE DR.
CITY-ST-ZIP: PORT RICHEY FL 34668

TITLE: Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: TR Change Addition
NAME: CHARLES WINDERS
STREET ADDRESS: 8732 COCHISE LANE
CITY-ST-ZIP: PORT RICHEY FL 34668

TITLE: TR Change Addition
NAME: CHARLES PAXTON
STREET ADDRESS: 13834 PIMBERTON DR
CITY-ST-ZIP: HUDSON FL 34669

TITLE: TR Change Addition
NAME: CECIL GARROLL
STREET ADDRESS: 8935 HARVEY LANE
CITY-ST-ZIP: PORT RICHEY FL 34668

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

TITLE: Change Addition
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 exemptions contained in Chapter 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:

Michael D Rembysz QUARTERMASTER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/24/06

Date

Daytime Phone #