

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000004352

FILED
Apr 16, 2002 8:00 AM
Secretary of State

Entity Name: "AMVETS POST #13 INC." DELAND, FL.

Current Principal Place of Business:

1011 GERONA AVENUE
DELTONA, FL 32725

New Principal Place of Business:

645 WEST NEW YORK AVE
DELAND, FL 32720

Current Mailing Address:

P.O. BOX 935
DELAND, FL 32720 US

New Mailing Address:

P.O. BOX 935
DELAND, FL 32721 US

FEI Number: 59-3334943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSBORNE, CHARLES
1011 GERONA AVENUE
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

DUNNING, EDWARD J
1175 WEST MINNESOTA AVE #89
DELAND, FL 32720 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: EDWARD DUNNING

04/16/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: WHEATON, DAVE
Address: 330 N SUMMIT AVE
City-St-Zip: LAKE HELEN, FL 32744

Title: DVC () Delete
Name: SNODGRASS, PAUL
Address: 639 W. MAY ST.
City-St-Zip: DELAND, FL 32720

Title: VCD () Delete
Name: GIBBANO, THOMAS
Address: 639 W MAY STREET
City-St-Zip: DELAND, FL 32720

Title: CD () Delete
Name: FAIBISY, STANLEY
Address: 708 W. OAK DAIL AVE.
City-St-Zip: DELAND, FL

Title: FOD () Delete
Name: OSBORNE, CHARLES E
Address: 1011 GERONA AVENUE
City-St-Zip: DELTONA, FL 32725

Title: DJA () Delete
Name: RUST, HOLGER
Address: 1274 HICKORY LANE
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: MCDONALD, GODFREY
Address: 231 WEST CARTER ST #9
City-St-Zip: DELAND, FL 32720

Title: DVC (X) Change () Addition
Name: DUNNING, EDWARD J
Address: 1175 WEST MINNESOTA AVE #89
City-St-Zip: DELAND, FL 32720

Title: VCD (X) Change () Addition
Name: GIBBAND, THOMAS
Address: 639 W MAY STREET
City-St-Zip: DELAND, FL 32720

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: EDWARD DUNNING

DVC

04/16/2002

Electronic Signature of Signing Officer or Director

Date