

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 732153

1. Entity Name
KENT PURCELL POST NO. 10090 VETERANS OF
FOREIGN WARS OF THE UNITED STATES, INC.



Principal Place of Business
920 HOSPITAL DR
NICEVILLE, FL 32578

Mailing Address
P.O. BOX 382
NICEVILLE, FL 32588

FILED
08 OCT -1 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09292008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
23-7089923

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REDDICK, ROBERT R
1812 RATTAN PALM DR
NICEVILLE, FL 32578

7. Name and Address of New Registered Agent

Name

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

City

100136581151
10/02/08--01048-FL2 249904
\$81.25

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 ROBERT R. REDDICK Robert R. Reddick 28 Sept 2008
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25

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 VD
NAME SHAVER, CHESTER D ☒ Delete
STREET ADDRESS 138 EDWARDS CIR
CITY-ST-ZIP WALPARISO, FL

TITLE SD
NAME HATTAWAY, JIMMY L ☐ Delete
STREET ADDRESS 337 HOLMES BLVD
CITY-ST-ZIP FORT WALTON BEACH, FL 32548

TITLE TD
NAME REDDICK, ROBERT R ☐ Delete
STREET ADDRESS 1812 RATTAN PALM DR
CITY-ST-ZIP NICEVILLE, FL 32578

TITLE P
NAME GOEHRINGER, DAVID S ☐ Delete
STREET ADDRESS 169 MARCIA DR
CITY-ST-ZIP FORT WALTON BEACH, FL 32548

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☒ Change ☐ Addition
NAME HATTAWAY, JIMMY L.
STREET ADDRESS 337 HOLMES BLVD
CITY-ST-ZIP FORT WALTON BEACH, FL 32548

TITLE SD ☐ Change ☒ Addition
NAME WILLIAM GOLDSTEIN
STREET ADDRESS 4412 SOUTH MINSTER CIR
CITY-ST-ZIP NICEVILLE, FL 32578

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

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

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

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

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: ROBERT R. REDDICK Robert R. Reddick 28 Sept 2008 850-678-6285
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #