2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 746372

Apr 22, 2019 Secretary of State 4228762052CC

FILED

Entity Name: PORT RICHEY POST NO. 6180 VETERANS OF FOREIGH WARS

OF THE UNITED STATES, INC.

Current Principal Place of Business:

11551 OSCEOLA DRIVE

NEW PORT RICHEY, FL 34654-1334

Current Mailing Address:

11551 OSCEOLA DRIVE

NEW PORT RICHEY, FL 34654-1334

FEI Number: 59-1900114 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SABLE, SHERYL R BOOKKEEPER 11551 OSCEOLA DRIVE NEW PORT RICHEY, FL 34654 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: SHERYL R. SABLE 04/22/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title COMMANDER Title SRV

Name BARTOSCH, ROBERT A Name BUTLER, HAROLD

Address 11120 ELDERBERRY DRIVE Address 11360 MINNIEOLA DRIVE

City-State-Zip: PORT RICHEY FL 34668 City-State-Zip: NEW PORT RICHEY FL 34664

Title JRV Title QM

NameD'AMORE, DONALDNameMOTTELER, GARYAddress11432 GOLF ROUND DRIVEAddress9540 STAR TRAIL

City-State-Zip: NEW PORT RICHEY FL 34654 City-State-Zip: NEW PORT RICHEY FL 34654

Title ADJUTANT Title CHAPLAIN

Name JESTUS, JON A Name FALKNER, JOSEPH M
Address 10520 SALAMANCA DR Address 10422 BERWYN STREET

City-State-Zip: PORT RICHEY FL 34668-3038 City-State-Zip: NEW PORT RICHEY FL 34654-3761

Title SURGEON Title 2 YR TRUSTEE

Name KROSNECKI, SAMMY W Name NUZZI, JIM JR

Address 13435 SUNFISH DRIVE Address 12919 SANDBURST LANE
City-State-Zip: HUDSON FL 34667-2653

Continues on page 2

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: GARY MOTTELER

QUARTERMASTER

04/22/2019

Officer/Director Detail Continued:

Title1 YR TRUSTEETitle3 YR TRUSTEENameZIVICA, FRANK JNameSERVELLO, FRANKAddress10905 SETARIA COURTAddress8225 AREVEE DRIVE

City-State-Zip: NEW PORT RICHEY FL 34655-4369 City-State-Zip: NEW PORT RICHEY FL 34653-1427