

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31908

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

**FILED**  
**Apr 08, 2023**  
**Secretary of State**  
**5401983550CC**

**Current Principal Place of Business:**

6315 STONE RD  
PORT RICHEY, FL 34668

**Current Mailing Address:**

6315 STONE RD  
PORT RICHEY, FL 34668

**FEI Number: 59-2912271**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WALDEN, ALAN J COMMANDER  
6315 STONE RD  
PORT RICHEY, FL 34668 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: ALAN J. WALDEN

04/08/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           COMMANDER  
Name           WALDEN, ALAN J  
Address        9140 LEDGESTONE LANE  
City-State-Zip: PORT RICHEY FL 34668  
  
Title           QUARTERMASTER  
Name           HEDRICK, STANLEY J  
Address        9036 ROBERT AVENUE  
City-State-Zip: PORT RICHEY FL 34668  
  
Title           SECOND YR TRUSTEE  
Name           CARREIRO, MATTHEW  
Address        4414 CHANDLER AVENUE  
City-State-Zip: SPRING HILL FL 34609-2004  
  
Title           JUNIOR VICE COMMANDER  
Name           HUGHES, TED V  
Address        9111 SAINT CLAIR LANE  
City-State-Zip: PORT RICHEY FL 34668

Title           SENIOR VICE COMMANDER  
Name           CANOSA, ANTHONY J  
Address        8732 HELMSLY LANE  
City-State-Zip: HUDSON FL 34667-6542  
  
Title           FIRST YEAR TRUSTEE  
Name           OWENS, MICHAEL  
Address        9305 COCHISE LANE  
City-State-Zip: PORT RICHEY FL 34668  
  
Title           THIRD YR TRUSTEE  
Name           BRADLEY, TUCKER W  
Address        6526 RUTH DRIVE  
City-State-Zip: PORT RICHEY FL 34668  
  
Title           CHAPLAIN  
Name           DAVISON, RAYMOND M  
Address        7314 ROYAL CRESCENT COURT  
City-State-Zip: PORT RICHEY FL 34668-6965

*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: ALAN WALDEN

COMMANDER

04/08/2023

Electronic Signature of Signing Officer/Director Detail

Date