

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713652

FILED  
Jan 24, 2012  
Secretary of State

**Entity Name:** WAKULLA COUNTY MEMORIAL POST NO. 4538 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

**Current Principal Place of Business:**

475 ARRAN ROAD  
CRAWFORDVILLE, FL 32327 WA

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1034  
CRAWFORDVILLE, FL 32327

**New Mailing Address:**

P.O. BOX 1034  
CRAWFORDVILLE, FL 32326

**FEI Number:** 59-6162515

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FETTER, ROBERT D SR  
154 JEAN DR  
CRAWFORDVILLE, FL 32327 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CDR  
Name: CHICHESTER, ERNEST  
Address: 525 WAKULLA ARRAN RD  
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: SRV  
Name: PEAK, NORMAN O  
Address: 314 FRANK JONES RD  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: JRV  
Name: TAYLOR, JAMES G  
Address: PO BOX 185  
City-St-Zip: PANACEA, FL 32346

Title: QM  
Name: FETTER, ROBERT D SR.  
Address: 154 JEAN DR  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: 1YR  
Name: MILLER, DALLAS  
Address: 23 TRECHE DR  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: 2YR  
Name: GOODING, KENNETH  
Address: 14 QUAPAW ST.  
City-St-Zip: CRAWFORDVILLE, FL 32327

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: ROBERT D. FETTER

QM

01/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date