

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722306

FILED
Aug 06, 2006
Secretary of State

Entity Name: WEST ORANGE POST NO. 4305 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

1170 E. PLANT ST.
P.O. BOX 770456
WINTER GARDEN, FL 347777456

New Principal Place of Business:

1170 E. PLANT ST.
P.O. BOX 770456
WINTER GARDEN, FL 34787 US

Current Mailing Address:

1170 E. PLANT ST.
P.O. BOX 770456
WINTER GARDEN, FL 347777456

New Mailing Address:

1170 E. PLANT ST.
P.O. BOX 770456
WINTER GARDEN, FL 347770456 US

FEI Number: 59-1289065 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HIGGINS, DAVID
219 N HIGHLAND AVE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

STOCKLEY, DENNIS R
1802 ADAIR STREET
OCOOEE, FL 34761 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: DENNIS R STOCKLEY

08/06/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HIGGINS, DAVID
Address: 219 N HIGHLAND AVE
City-St-Zip: WINTER GARDEN, FL 34787

Title: S () Delete
Name: IRELAND, BERNARD R
Address: PO BOX 770456
City-St-Zip: WINTER GARDEN, FL 34787

Title: D (X) Delete
Name: SLATDEN, BERT
Address: 9 GARDENIA DR
City-St-Zip: WINTER GARDEN, FL

Title: T (X) Delete
Name: BOYEN, DAVID
Address: PO BOX 770456
City-St-Zip: WINTER GARDEN, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S/T (X) Change () Addition
Name: STOCKLEY, DENNIS R
Address: 1802 ADAIR STREET
City-St-Zip: OCOEE, FL 34761 US

Title: D (X) Change () Addition
Name: ADAMS, ROBERT E
Address: 1015 GLEN HARBOR CIR
City-St-Zip: WINTER GARDEN, FL 34787 US

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 Chapter 119, 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: DENNIS R STOCKLEY

S/T

08/06/2006

Electronic Signature of Signing Officer or Director

Date