## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 12, 2002 8:00 am **DOCUMENT # 722832 Secretary of State** 1. Entity Name BASS CAPITAL POST NO. 10177, VETERANS OF FOREIGN 02-12-2002 90107 017 \*\*\*\*70 00 WARS OF THE UNITED STATES, INC. Principal Place of Business Mailing Address 461 OLD HWY 17 **VFW POST 10177** P. O. BOX 264 VFW POST 10177 CRESCENT CITY FL 32112 CRESCENT CITY FL 32112 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 23-7141519 Not Applicable Country Zip Country \$8.75 Additional Zio 5. Certificate of Status Desired $\mathbf{Z}$ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent OSEPH MALINE MALINE, JOSEPH F REESE, RØBERT G 202 OSCEOLA ST. 228 PALM AVE CRESCENT CITY FL 32112 GEORFETONN FL 32139 33°39 TEDRUCE TOWN 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 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 , Trust Fund Contribution. **Department of State** Added to Fees 3 1 3 18 14 . 1 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (9/04)Addition Delete TITLE BERRY, ALAN L NAME NAME . CR2E037 STREET ADDRESS STREET ADDRESS 2609 GULF DR CITY-ST-ZIP CITY-ST-ZIP PALATKA FL Change Change Addition P Delete TITLE BONAPARTE, FOHN 904 CENTER ST. TITLE MALINE, JOSEPH F NAME NAME STREET ADDRESS STREET ADDRESS 202 OSCEOLA ROAD ST. CRESCENT CITY, FC CITY-ST-ZIP CITY-ST-ZIP GEORGETOWN FL ☐ Change ☐ Addition Delete TITLE SIMMONS, CARL NAME NAME STREET ADDRESS STREET ADDRESS 19 CEDAR STREET CITY-ST-ZIP CITY-ST-ZIP CRESCENT CITY FL MALNE, JUSEPH F Change Change ■ Addition Delete TITLE TITLE NAME NAME reese, robert 201 OSCECLA ST STREET ADDRESS STREET ADDRESS 228 PALM AVE GEORFE TONN FL 3213S CITY-ST-ZIP CITY-ST-ZIP CRESCENT CITY FL 32112 Addition □ Delete TITLE CLYBURN, LLOYD E. NAME STREET ADDRESS STREET ADDRESS 110 PEGGY LANE CITY-ST-ZIP CITY-ST-ZIP **GEORGETOWN FL** Change ☐ Addition Delete TITLE TITLE REESE RUBERT NAME NAME BONAPARTE, JASPER 228 PALM AVE STREET ADDRESS STREET ADDRESS 205 DENER RD CITY-ST-ZIP CITY-ST-ZIP CRESCENT CITY CRESCENT CITY FL 32112 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

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