2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

9/11/2007-90006-041-$61.25-$61.25

FILED
07 OCT 11 PM 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 723090

1. Entity Name

MOORE MOLANDER NORTH POST NO. 9726, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

2nd MOORE CR2E037 (4/07)

Principal Place of Business	Mailing Address
350 S.VOLUSIA AVENUE PIERSON FL 32180	PO BOX 596 PIERSON FL 32180

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-6162562 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SMITH, JULIUS C 72 E 1ST AVE PIERSON FL 32180	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25 Due By September 5, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HALLMAN, HOLLIS W 672 VANNOTE RD PIERSON FL 32180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V RAINWATER, WILSON 405 N ANE ST PIERSON FL 32180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST PETERSON, JAMES T 267 S VOLUSIA AVE PIERSON FL 32180	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T T. Richard Purvis 548 N. Pine ST. Pierson, FL. 32180 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRADDOCK, NORMAN E 565 BRADDOCK RD PIERSON FL 32180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BULLARD, THOMAS H 1375 EMPORIA RD PIERSON FL 32180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WARD, WALTER E 448 SHAW LAKE RD PIERSON FL 32180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

10/12

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

cell 386-837-3515

SIGNATURE: T. Richard Purvis T. Richard Purvis Oct. 2, 07 386-749-2563

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #