

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90022 017 ****61.25

DOCUMENT # 726448 1. Entity Name CHESTER MCKAY POST NO. 7987, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.					
Principal Place of Business 7445 CHESTER MCKAY DRIVE NEW PORT RICHEY, FL 34655				Mailing Address 7445 CHESTER MCKAY DRIVE NEW PORT RICHEY, FL 34655	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		54033985 	
City & State		City & State		4. FEI Number 59-6162539	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WARD, STEVE E 10985 PEPPERTREE LN PORT RICHEY, FL 34668				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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 <u><i>Steve E. Ward</i></u> COMMANDER 4-12-04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				Filing Fee is \$61.25 Due by May 1, 2004	
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	CMD WARD, STEVE E 10985 PEPPERTREE LN PORT RICHEY, FL 34668		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BOYKO, FRANK JR 3550 MORROW ST NEW PORT RICHEY, FL 34655		TITLE NAME STREET ADDRESS CITY - ST - ZIP	SAXTON, BIERCK 7445 CHESTER MCKAY DR. NEW PORT RICHEY, FL 34655 (D)	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D OLSON, ROBERT E 4046 PASSPORT ST NEW PORT RICHEY, FL 34653		TITLE NAME STREET ADDRESS CITY - ST - ZIP	SCHWEITZER, DENNIS 7445 CHESTER MCKAY DR. NEW PORT RICHEY, FL 34655 (D)	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MARUTZ, CARL L 7955 KNOX LOOP NEW PORT RICHEY, FL 34655		TITLE NAME STREET ADDRESS CITY - ST - ZIP	PASCOE, ROBERT 7445 CHESTER MCKAY DR NEW PORT RICHEY, FL 34655 (T)	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
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.					
SIGNATURE: <u><i>Steve E. Ward</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			3-16-04 727-376-5096 Date Daytime Phone #		