

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90002 026 ****61.25

DOCUMENT # 726980

1. Entity Name

**THOMAS F. WELCH POST 706, VETERANS OF FOREIGN WA
 RS OF THE UNITED STATES, INC.**

Principal Place of Business

Mailing Address

**5000 LILLIAN HWY
 PENSACOLA FL 32506**

**PO BOX 3140
 PENSACOLA FL 32516**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0598443

☒ 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

**KENNEDY, BILLY JO
 5000 LILLIAN HWY
 PENSACOLA FL 32506**

Name
BILLY JO DRAKE

Street Address (P.O. Box Number is Not Acceptable)
5000 Lillian Hwy, P.O. Box 3140

City
Pensacola

FL

Zip Code
32516

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.

SIGNATURE **BILLY JO DRAKE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Billy Jo Drake **1-8-02**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CMDR** ☐ Delete
 NAME **PRITCHARD, JOHN E**
 STREET ADDRESS **5080 LILLIAN HWY PO BOX 3140**
 CITY-ST-ZIP **PENSACOLA FL 32516**

TITLE **Commander** ☒ Change ☐ Addition
 NAME **Harry L. Drake**
 STREET ADDRESS **5000 Lillian Hwy, P.O. Box 3140**
 CITY-ST-ZIP **Pensacola, FL 32516**

TITLE **SVC** ☐ Delete
 NAME **SCOTT, ROBERT F**
 STREET ADDRESS **5000 LILLIAN HWY PO BOX 3140**
 CITY-ST-ZIP **PENSACOLA FL 32516**

TITLE **SVC** ☒ Change ☐ Addition
 NAME **Terry Sanders**
 STREET ADDRESS **5000 Lillian Hwy, P.O. Box 3140**
 CITY-ST-ZIP **Pensacola, FL 32516**

TITLE **JVC** ☐ Delete
 NAME **SANDERS, TERRY**
 STREET ADDRESS **5000 LILLIAN HWY PO BOX 3140**
 CITY-ST-ZIP **PENSACOLA FL 32516**

TITLE **JVC** ☒ Change ☐ Addition
 NAME **Dennis Keen**
 STREET ADDRESS **5000 Lillian Hwy, P.O. Box 3140**
 CITY-ST-ZIP **Pensacola, FL 32516**

TITLE **QM** ☐ Delete
 NAME **JORDAN, KARL S**
 STREET ADDRESS **5000 LILLIAN HWY PO BOX 3140**
 CITY-ST-ZIP **PENSACOLA FL 32516**

TITLE **QM** ☐ Change ☐ Addition
 NAME **Karl S. Jordan**
 STREET ADDRESS **5000 Lillian Hwy, P.O. Box 3140**
 CITY-ST-ZIP **Pensacola, FL 32516**

TITLE **T** ☐ Delete
 NAME **GILMAN, RICHARD A**
 STREET ADDRESS **5000 LILLIAN HWY PO BOX 3140**
 CITY-ST-ZIP **PENSACOLA FL 32516**

TITLE **Trustee** ☐ Change ☐ Addition
 NAME **Daniel F. Verones**
 STREET ADDRESS **5000 Lillian Hwy, P.O. Box 3140**
 CITY-ST-ZIP **Pensacola, FL 32516**

TITLE **T** ☐ Delete
 NAME **VERONES, DANIEL F**
 STREET ADDRESS **5000 LILLIAN HWY PO BOX 3140**
 CITY-ST-ZIP **PENSACOLA FL 32516**

TITLE **Trustee** ☒ Change ☐ Addition
 NAME **Elbert E. Jermyn**
 STREET ADDRESS **5000 Lillian Hwy, P.O. Box 3140**
 CITY-ST-ZIP **Pensacola, FL 32516**

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: **HARRY L. DRAKE** *Harry L. Drake* **01-05-02** **850-455-0026**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)