2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 20, 2006 8:00 am **Secretary of State L**OCUMENT # 731014 1. Entity Name 02-20-2006 90047 049 ****61.25 JOHN S. LYMAN, JR. POST #4536, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC. Principal Place of Business Mailing Address 4401 DIXIE HWY, NE PALM BAY FL 32905 4401 DIXIE HWY, NE PALM BAY FL 32905 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 23-7091101 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WILLIAMS, DAVID J Street Address (P.O. Box Number is Not Acceptable) 320 BREAKWATER ST SE PALM BAY FL 32909 City 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 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 概能 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE ☐ Change ☐ Addition NUNN, GARY L NAME NAME 4401 DIXIE HWY NE : STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BAY FL 32905 CITY-ST-7IP VPD CPV. TITLE Delete TITLE Change Change ☐ Addition GALLOWAY, WILLIAM NAME DAMIEL SCALP NAME STREET ADDRESS 4401 DIXIE HWY NE STREET ADDRESS put sixia lotte PALM BAY FL 32905 CITY-ST-ZIP CITY-ST-ZIP VP______ THE X Delete Change ☐ Addition NAME SULLIVAN, THOMAS NAME 4401 DIXIE HWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BAY FL 32905 CITY-ST-ZIP TITLE Delete TITLE Change Addition WILLIAMS, DAVID J NAME STREET ADDRESS 320 BREAKWATER ST SE STREET ADDRESS CITY-ST-ZIP PALM BAY FL 32909 CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition HORAN, JOE E NAME NAME 4401 DIXIE HWY NE STREET ADDRESS STREET ADDRESS PALM BAY FL 32905 CITY-ST-Z(P CITY-ST-ZIP TITE F □ Defete TITLE ☐ Change ☐ Addition HOGGAT, CHARLES NAME NAME

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

STREET ADDRESS

CITY-ST-ZIP

4401 DIXIE HWY NE

PALM BAY FL

STREET ADDRESS

CITY-ST-ZIP