

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90037 041 ****70.00

DOCUMENT # 741032 1. Entity Name KISSIMMEE MEMORIAL POST NO 4225 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.					
Principal Place of Business 504 S. RANDOLPH STREET KISSIMMEE, FL 34741-6173				Mailing Address 504 S. RANDOLPH STREET KISSIMMEE, FL 34741-6173	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
TIFFANNY, CHARLES B. 112 BROADWAY KISSIMMEE, FL 32741				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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
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	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	DAVIDSON, ROBERT		NAME		
STREET ADDRESS	2340 VIRGINIA DRIVE		STREET ADDRESS		
CITY-ST-ZIP	KISSIMMEE, FL 34741		CITY-ST-ZIP		
TITLE	QTD	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	KELLY, LESLIE B JR		NAME	SMITH, DONALD R.	
STREET ADDRESS	1704 PLEASANT HILL ROAD		STREET ADDRESS	5053 VILLANOVA RD	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	KISSIMMEE, FL 34746	
TITLE	SD	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	MOWERY, WILLIAM J		NAME	DENIS CAPRIGLIONS	
STREET ADDRESS	1629 MARK STREET		STREET ADDRESS	614 CANTERBURY LN	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	KISSIMMEE, FL 34741	
TITLE	SVD	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	PAGAN, TOMAS		NAME	ROGER AVOK	
STREET ADDRESS	2168 SANTA CRUZ DRIVE		STREET ADDRESS	2520 CAMPHORWOODSCIR	
CITY-ST-ZIP	KISSIMMEE, FL 34746		CITY-ST-ZIP	KISSIMMEE, FL 34744	
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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:			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DONALD R. SMITH		
			Date _____ Daytime Phone # (407) 346-1641		