FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMent of State

FILED

Jun 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

742716

(4)

FRANK B. HUDDLESTON POST NO. 81, INC.

FHANK B. HUDDLESTON POST NO. 81, INC.								
Principal Place of Business				Mailing Address				
2809 S. HARBOR CITY BLVD. MELBOURNE FL 32801				2909 S. HARBOR CITY BLVD. MELBOURNE FL 32901-7213 US				3. Date Incorporated or Qualified 3a. Date of Last Report
								05/05/1978 03/27/1996
2. Principal Place of Business			├	2a. Mailing Address				4. FEI Number Applied For S9-6153174 Not Applied by
Suite, Apt. #, etc.			26	Suite, Apt. #, etc.				\$0.75 Admini
22			\vdash	27				5. Certificate of Status Desired Fee Required
City & State				City & State				6. Election Campaign Financing \$5.00 May Be
23			28					Trust Fund Contribution
Zip				Cour	ntry		8. This corporation has liability for intangible tax under s. 199.032,	
24 25 29 29 29 29 29 25 29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20				[30]				Florida Statutes Yes No 10. Name and Address of New Registered Agent
ļ	9, 1101110	and Addiese of Coll	ont nogiste	nea Mant		81	Name	(0, Name and Address of New Yorks and Agent
			\ -					
	AVIS, RICHARD & 106 GOLDFINCH						Street Add	dress (P.O. Box Number is Not Acceptable)
	ELBOURNE FL 3			Ţ				
MARCOCKINE I E OZOGO				ļ			City	85 Zip Code
					i		•	FL '
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE								
Signature. Aped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
12.		OFFICERS A	ND DIRECT		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VO	UD OUADICO I		DELETE	1.1 TITU		D	Francis X Mollay, A Change Addition
NAME	1	UR, CHARLES J NCHOR NW			1.2 NAM		pporce	1914 agora CV. SIE
ASTREET AS		BAY FL 32907			1.3 STR		DURESS	PAIN BAY F1. 32909
TITLE	10	MI IL OLGOI		☐ DELETE	2.1 TITL			WECZYNSKI ALBERTL Change Addition
NAME	, -	ynski, albert l			2.2 NAN	ME /	75 K	WECZYNSKI VILBEITE
STREET AL		AYNE DR.			23 STR	REET A	DDRESS /	425 KRINCT.
CITY-ST-		URNE FL 32901			2. 4 CIT	TY-\$T	-ZIP	ALM BAY FL 32905
TITLE	SDPD			DELETE	3.1 TITL	LE	n I	JOSEPH FI. DICE SR AChange LAddition
NAME		RICHARD S SR			3.2 NAM		~ 3	3140 DEER RUN DE WE
STREET AL		OLDFINCH CT.					DDRESS P	ALM BAY FL 32906
CITY-ST-		URNE FL 32935		DELETE	3.4. CIT 4.1 TITU	F		Change Addition
NAME	VD BELL (ERALD W		OCEC 12	4.1 1113 4.2 NA	MF	D / A	TON H. BLOSE Change Addition
STREET AL		X 500129 N/A					DDRESS 2	ANA BAY FL 92909
CITY-ST-				_	4.4 CITY			
TITLE	D	.711,5		DELETE	5.1 TITL		1//	arold T. Crabtree Change Addition 712 Sayabec St. N. W.
NAME	MANKA	MYER, HAROLD E		/ •	5.2 NAN	ME	V 17	197010 1. Crabico
STREET AL	DRESS 241 AVI	ENIDA DEL MAR			53 STR	LEET A	DDRESS 🖊	712 Sayabec St. N.
CITY-ST-	ZIP INDIALA	NTIC FL 32903			5.4 CiTY	Y-ST-	1 5	Palm Bay, F1. 32907
TITLE	D			☐ DELÉTE	6.1 TITL		$ \mathbf{p} /$	71194 LINTS Change Addition
NAME	LINTZ,				6.2 NAN			2100 CINDY CIRC
STREET AC		INDY CR.			6.3 STR		DDWE99 -	,
CITY-ST-	ZIP MELBO	URNE FL	ied with this	filing does not curd	6.4 CITY	Y-ST-	ZIP Totion state	MEBOURNE FL 32935
info	ormation indicated	on this annual report o	suppleme	ntal annual report is	true and ac	cours	te and the	at my signature shall have the same legal effect as if made under oath; that
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Morida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is tryle and acquirate 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 trusted exprovered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes on an attachment with an address.								