

747309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

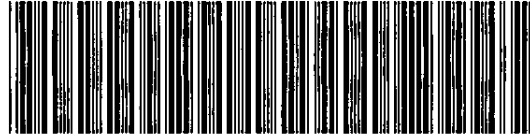
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RA
Change

11/06/15--01014--001 **35.00

FILED
2015 NOV 18 PM 3:01
CLERK OF STATE
TALLAHASSEE, FLORIDA

*00789, 00721, 00524, 00671



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 9, 2015

Lisa Vetro
VFW Post 8681
18940 Drayton St.
Spring Hill, FL 34610

SUBJECT: VETERANS OF FOREIGN WARS OF THE UNITED STATES INC.
SHADY HILLS POST NO. 8681
Ref. Number: 747309

We have received your document for VETERANS OF FOREIGN WARS OF THE UNITED STATES INC. SHADY HILLS POST NO. 8681 and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

If you are changing the registered agent please put the "current" registered agent in paragraph 5 (see attached printout) and the "new" registered agent information in paragraph 6.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 615A00023693

RECEIVED
15 NOV 18 PM 1:35

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VFW Post 8681 Shady Hills FL
Name of Corporation

DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Vetro
Name of Contact Person

VFW Post 8681
Firm/Company

18940 Drayton St
Address

Spring Hill FL 34610
City/State and Zip Code

Post 8681 @ F1VFW.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lisa Vetro at (352) 573-0165
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Veterans of Foreign Wars of the United States, Inc
Shady Hills Post No. 8681
2. The principal office address: 18940 Drayton St
Spring Hill FL 34610
3. The mailing address (if different): same
4. Date of incorporation/qualification: _____ Document number: _____
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Lisa Vetro Thomas Sharp resigned
17705 BATHURST AVE
SPRING HILL, FL 34610

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Lisa Vetro
18940 Drayton St
Spring Hill FL 34610

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Kenneth Greenlee
Signature of an officer or director

Kenneth Greenlee
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

11/3/15
Date

If signing on behalf of an entity:

Lisa Vetro
Typed or Printed Name

*** FILING FEE: \$35.00 ***