## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Feb 12, 2007 8:00 am **Secretary of State DOCUMENT #750488** 02-12-2007 90099 037 \*\*\*\*61.25 DICKINSON-TOMPKINS POST 2380 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC. Principal Place of Business Mailing Address 510 S ALABAMA AVE. P O BOX 142 P.O. BOX 142 DELAND, FL 32721 US DELAND, FL 32724-5944 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 23-7140046 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7./Name and Address of New Registered Agent FENDT, FRED W Address (P.O. Box Number is Not Acceptable) 112 WEST NEW YORK AVE DELAND, FL 32720 City 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 d agent and title it a (NOTE. Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Commander Z-Delete [\*] Change TIBE TITLE Addition MILLHOLEN, GERRY ARTHUR M. THOMAN NAME STREET ADDRESS 811 W EUCLID AVE STREET ADDRESS 1020 Saddle HilloRd; DeLand, Fl. 32720 Rd; CITY-ST-ZIP DELAND, FL 32720 CITY-ST-ZIP Quartermaster 4 Delete nn e Tì∏ F ☐ Addition Frank Syfor CURTIS, CLYDE NAME NAME 1011 SHAYLER AVE STREET ADDRESS STREET ADDRESS 328 Rain Tree Circle CITY-ST-7IP DELAND, FL 32724 CITY-ST-ZIP DeLand, Fl 32724 ☐ Change TITLE ☐ Delete TITLE ■ Addition BROWN, GEORGE V NAME NAME STREET ADDRESS STREET ADDRESS 101 N AMELIA AVE CITY-ST-ZiP DELAND, FL 32720 CITY-ST-ZIP Delete ☐ Change Addition SYFOR, FRANK NAME NAME 328 RAINTREE CIR STREET ADDRESS STREET ADDRESS DELAND, FL 32724 CITY-ST-7IP CRY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition RUST, HOLGER F NAME NAME 1274 HICKORY LN STREET ADDRESS STREET ADDRESS CITY-ST-ZIE DELAND, FL 32724 City-St-ZiP Delete HILE Change ■ Addition THOMAN, ART NAME NAME STREET ADDRESS 1020 SADLE HILL RD STREET ADDRESS DELAND, FL 32720 CITY-ST-ZIP CITY-ST-ZIP

FILED

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