## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David Gonzales, Quartermaster

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED **DOCUMENT # 751574** Mar 27, 2000 8:00 am 1. Entity Name **Secretary of State** ASTOR POST NO. 9986 VETERANS OF FOREIGN WARS OF 03-27-2000 90109 042 \*\*\*\*61.25 Principal Place of Business Mailing Address 55620 VETIRANS DR. 55620 VETIRANS DR. P O BOX 141 P O BOX 141 ASTOR FL 32102 ASTOR FL 32102-0141 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FE! Number Applied For 59-1696883 Not Applicable Zip Country Zip 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 Gonzales, David David Gonzales Street Address (P.O. Box Number is Not Acceptable) HACKWORTH PRINEST P. O. Box 127 56310 Red Bud Road 286 S. CENTRAL AVE. 56310 Red Bud Road JMATILLA FL 32784 Astor Astor, FL 32102 Zip Code FL 32102 <del>Astor</del> 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. Ðavid Gonz∂les, Quartermaster 3-23-00 SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change ☐ Addition TITLE Delete TITLE CD BOWERS, THOMAS NAME NAME Paul T. Blair 55521 FBONT ST STREET ADDRESS STREET ADDRESS P. O. Box 492 **ASTOR FL 32102** 23827 River Road CITY-ST-ZIP CITY-ST-ZIP Astor, FL 32102 VCD Change Addition TITLE Delete TITLE SVD Franklin Davis POLLITZ, AUGUST NAME NAME P. O. Box 791 23931 Ermine Road 518 DOBOTHY AVENUE STREET ADDRESS STREET ADDRESS Astor, FL 32102 HOLLY HILL FL 32102 CITY-ST-ZIP CITY-ST-7IP Change ~ Addition TITLE Delete TITLE JVD Earl Jamieson MOORE, GEORGE W JR NAME NAME 1392 Spring Garden Road 23936 CHESTNUT RD STREET ADDRESS STREET ADDRESS DeLeon Springs, FL 32130 **ASTOR FL 32102** CITY-ST-7IP CITY-ST-ZIP DOM Change ☐ Addition Delete TITLE TITLE DOM David Gonzales HACKWORTH, EBNEST NAME NAME 286 S. CENTRAL AVE 56310 Red Bud kc P.O. Box 127 STREET ADDRESS STREET ADDRESS LIMATILLA FL 32784 CITY-ST-ZIP Astor, FL 32102 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

352-759-3465

March 23, 2000