1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 752974**

MICCO POST 4425, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Principal Place of Business VFW POST 4425 BAREFOOT BAY FL 32976

2. Principal Place of Business

Mailing Address

VFW POST 4425 PO 80X 770-102 BAREFOOT BAY FL 32976

2a. Mailing Address

## **FILED** Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90010 004 \*\*\*\*61.25



3. Date Incorporated or Qualifed 06/16/1980

Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number		Ap	plied For	
22	27				59-1905860			t Applicable	
	City & State City & State					d 🗆	\$8.75 A		
23	28				5. Certifcate of Status Desired		Fee Required		
Zip	Country	Zip	Countr	y	6. Election Campaign Financ	ing	\$5.00	May Bo	
24	25	29	30		Trust Fund Contribution	"" <sup>y</sup> 🗆	Added to	•	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
					81 Name				
ROBERT P FITZGERALD									
913 SW CASHEW CIR				82 Street Address (P.O. Box Number is Not Acceptable)					
BAREFOOT BAY FL 32976									
DAILE OUT DAT TE 32970									
				84 City 85 Zip Code					
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 on the state of Florida.									
aragent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
SIGNATURE									
12.	Signature, typed or printed name of registered agent a		13.	int signature requir	red when reinstating)	DATE	ND DIDEOTA	20 111 40	
TILE	OFFICERS AND	DELETE		······································	ADDITIONS/CHANGES TO	OFFICERS A			
	Robert P Fitzgerald		1.1 TITLE	[			Change	Addition	
NAME			1.2 NAME		* ***				
STREET ADDRESS	913 SW CASHEW CIR		1.3 STREE	TADDRESS	- *	. `		ļ	
CITY-ST-ZIP	BAREFOOT BAY, FL 32976		1.4 CITY-5	ST-ZIP					
TIELE	D	☐ DELETE	2.1 TITLE			٠.	Change	☐ Addition	
NAME	EUGENE J HENRY	·	2.2 NAME						
_STREET ADDRESS	_7.16.AMARYLLIS.DR	<del></del>	2.3 STREE	T ADDRESS	<u>-                                    </u>				
CITY-ST-ZIP	BAREFOOT BAY FL		2. 4 CITY-	ST-ZIP					
TITLE	D	□ DELETE	3.1 TTTLE				☐ Change	☐ Addition	
NAME (CO. 15	BABECKI, ALFRED J		3.2 NAME						
STREET ADDRESS	. 915 HEMLOCK ST.		3.3 STREE	TADDRESS					
CITY-ST-ZIP	BAREFOOT BAY FL 32976		3.4. CITY-1	ST-ZIP					
TITLE	D	☐ DELETE	4.1 TITLE				Change	Addition	
NAME .	RICHARD G HIGGINS		4, 2 NAME		•				
STREET ADDRESS	1169 W BAREFOOT CIR	-	4.3 STREE	TADORESS	,	· ` . · ` :			
CITY-ST-ZIP	BAREFOOT BAY, FL 32976		4.4 CITY-S	- 1		ŕ			
TITLE	D	☐ DELETE	5.1 TITLE	111211			Change	☐ Addition	
NAME	RILEY, CORNELIUS T		5.2 NAME						
STREET ADDRESS	635 E HYACINTH CIR		5.3 STREE	TADDRESS				]	
CITY-ST-ZIP	BAREFOOT BAY, FL 32976		5.4 CITY-S						
TITLE	D	☐ DELETE	6.1 TITLE	1-44			☐ Change	Addition	
NAME	WILLIAM J HULSART	orecit	6.2 NAME				☐ cuanda		
STREET ADDRESS	717 N GLADIOLUS DR		1	TADORESS					
			1					,	
CITY-ST-ZIP	BAREFOOT BAY FL		6.4 CITY-S	T-ZIP				1	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or or on an attachment with an address, with all other like empowered.

SIGNATURE: