

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 20, 2004 08:00 AM
Secretary of State

DOCUMENT # 757492

1. Entity Name
**SOUERS-KNUCK-O'ROURKE POST NO. 8330,
VETERANS OF FOREIGN WARS OF THE UNITED
STATES INC.**



Principal Place of Business
**VFW POST 8330
355 EAST 32ND ST
HIALEAH, FL 33013 US**

Mailing Address
**355 EAST 32ND ST
HIALEAH, FL 33013**

DO NOT WRITE IN THIS SPACE



02102004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-0942384

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**RIVERA, RAY
1021 W. 53RD ST.
HIALEAH, FL 33012**

**DO NOT WRITE
IN THIS SPACE**

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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD RIVERA, RAY 1021 W. 53RD ST HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GRUBISICH, TONY 6270 NW 113 TERR. HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY - ST - ZIP	QM TETREAU, WILLIAM J 3555 32ND STREET HIALEAH, FL 33013
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VALLADARES, MICHAEL 3650 E. 5 AVE HIALEAH, FL 33013
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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02/21/04-80001-005 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: *William J Tetreau* *Quaternary 2/18/04* *305 888 8666*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #