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FILED

Mar 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758797 (5)

1. Corporation Name

MYAKKA POST 10476 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Principal Place of Business

P O BOX 27232
EL JOBEAN FL 33927

Mailing Address

P O BOX 27232
EL JOBEAN FL 33927-72323. Date Incorporated or Qualified
06/16/19813a. Date of Last Report
03/30/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

59-2116716

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BONNELL D. THEODORE
13383 BRONZE AVE
PORT CHARLOTTE FL 33981

81 Name

REYNNELLS, Jack S.

82 Street Address (P.O. Box Number is Not Acceptable)

1588 Birchcrest Blvd.

83

84 City

Port Charlotte,

FL

85 Zip Code

33982

11. 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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE Registered Agent signature required when reinstating)

DATE

Feb 28 '97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME BONNELL, THEODORE V
STREET ADDRESS 13383 BRONZE AVE
CITY-ST-ZIP PORT CHARLOTTE FL 339811.1 TITLE D ☒ Change ☐ Addition
1.2 NAME REYNNELLS, Jack S.
1.3 STREET ADDRESS 1588 Birchcrest Blvd.
1.4 CITY-ST-ZIP Port Charlotte, FL., 33982TITLE AD ☒ DELETE
NAME GRISELL, HENRY T
STREET ADDRESS 6314 DRUDE CT
CITY-ST-ZIP PORT CHARLOTTE FL2.1 TITLE ☒ Change ☐ Addition
2.2 NAME GRAFE, Harold C.
2.3 STREET ADDRESS 4161 Chippewa St.
2.4 CITY-ST-ZIP Port Charlotte, FL., 33981TITLE AD ☒ DELETE
NAME STITMAN, CHARLES J.
STREET ADDRESS 13504 ISABELL AVE.
CITY-ST-ZIP PT CHARLOTTE FL3.1 TITLE ☒ Change ☐ Addition
3.2 NAME FITZGERALD, Henry S.
3.3 STREET ADDRESS 13491 Romford Ave.
3.4 CITY-ST-ZIP Port Charlotte, FL., 33981TITLE T ☐ DELETE
NAME ECKERT, CHARLES
STREET ADDRESS 6334 CUTLER TERR
CITY-ST-ZIP PORT CHARLOTTE FL 339814.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE T ☒ DELETE
NAME FITZGERALD, HENRY
STREET ADDRESS 13491 ROMFORD AVE
CITY-ST-ZIP PORT CHARLOTTE FL 339815.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE T ☒ DELETE
NAME STSTMAN, CHARLES
STREET ADDRESS 13504 ISABELL AVE
CITY-ST-ZIP PORT CHARLOTTE FL 339816.1 TITLE ☒ Change ☐ Addition
6.2 NAME BONNELL, Theodore V.
6.3 STREET ADDRESS 13381 Bronze Ave.
6.4 CITY-ST-ZIP Port Charlotte, FL., 33981

14. I do 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0058365

CR2E037 (9/96)