FILED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759456

Apr 10, 2001 8:00 am Secretary of State CLEARWATER CHAPTER OF THE MILITARY ORDER OF THE WORLD WARS, 04-10-2001 90079 045 ****61.25 Principal Place of Business Mailing Address 4979 CAMBERLEY LANE 4979 CAMBERLEY LANE OLDSMAR FL 34677 OLDSMAR FL 34677 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2129092 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 Name Street Address (P.O. Box Number is Not Acceptable) HARAGEONES, A.J. COL USA 4979 CAMBERLEY LANE OLDSMAR FL 34677 City Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to \$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 10. OFFICERS AND DIRECTORS 11. CR2E037 (10/00) Delete ☐ Addition TITLE TITLE Change Justice, William G. COL, USMC BERRES, JOHN P COLUSA NAME 2867 CEDER RUN COURT STREET ADDRESS 1912 Cleveland St. STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 34621-3206 CITY-ST-ZIP Clearwater, FL 33765-3009 Delete Change TITLE TITLE ☐ Addition FITZGERALD, RICHARD A COL.USA Johnson, Loyd COL, USAF NAME NAME STREET ADDRESS 2686 BRATTLE LANE STREET ADDRESS 2134 Diamond Ct. CITY-ST-ZIP **CLEARWATER FL 34621-1200** CITY-ST-ZIP 01dsmar, FL 34677 ☐ Addition TITLE ☐ Delete TITLE Change HARAGEONES, A.J. COLUSA NAME STREET ADDRESS 4979 CAMBERLEY LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP OLDSMAR FL 34677-5114 Delete TITLE TITLE ☐ Addition BERRY, DAVID C LTC.USA NAME NAME Miller. Geale, Mrs. 3475 NORTHRIDGE DRIVE STREET ADDRESS STREET ADDRESS 200 Glennes Lane #202: CITY-ST-ZIP CLEARWATER FL 34621 CITY-ST-ZIP Dunedin, FL 34698-5920 **7** Delete TITI F Change TITLE Addition JOHNSON, EDWARD C CWO.USA NAME NAME Smith, George K. LTC, USA STREET ADDRESS 2225 GLENMOOR ROAD SOUTH STREET ADDRESS 5027 Cross Pointe Dr. CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 34624-4922 Oldsmar, FL 34677 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

CITY-ST-ZIP

YEO NAME OF SIGNING OFFICER OR DIRECTOR

J. Harageones Warageones | RColonel, USA, Finance Officer

Daytime Phone #