

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2001 8:00 am
Secretary of State

01-13-2001 90001 016 ****61.25

DOCUMENT # 759486

1. Entity Name

N. J. DORCH POST NO. 10085, VETERANS OF FOREIGN

Principal Place of Business

Mailing Address

HIGHWAY 279 N
 VERNON FL 32462
 US

P.O. BOX 602
 VERNON FL 32462
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59 2215479
 23 7089924

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MICHAELS, GLEN D
~~434 WISTERIA LN~~
 CHIPLEY FL 32428

Name

MICHAELS, GLEN D,

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

645 3RD ST

City

CHIPLEY

FL

Zip Code

32428-1445

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

Glen D Michaels

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

(NOTE: Registered Agent signature required when reinstating)

01-06-01

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P Delete
 NAME GLEN D. MICHAELS
 STREET ADDRESS ~~434 WISTERIA LANE~~
 CITY-ST-ZIP CHIPLEY FL 32428

TITLE Change Addition
 NAME
 STREET ADDRESS 645 3RD ST.
 CITY-ST-ZIP CHIPLEY FL 32428-1445

TITLE VP Delete
 NAME JAMES A. TAYLOR
 STREET ADDRESS 3448 ROSE LANE
 CITY-ST-ZIP VERNON FL 32462

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE T Delete
 NAME FRED JOHNSON
 STREET ADDRESS 3821 SHELL LANDING RD.
 CITY-ST-ZIP VERNON FL 32462

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE T Delete
 NAME VICTOR GRIGOSA
 STREET ADDRESS 209 SUNNY HILLS
 CITY-ST-ZIP CHIPLEY FL 32428

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE T Delete
 NAME CASPER, JAMES E
 STREET ADDRESS 708 NO 7TH ST
 CITY-ST-ZIP CHIPLEY FL 32428

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Glen D Michaels* GLEN D. MICHAELS 01-06-01 850-638-2111
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)

