

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 03, 2003 8:00 am**  
**Secretary of State**

03-03-2003 90854 039 \*\*\*\*70.00

**DOCUMENT # 763001**

1. Entity Name

**DONALD A. ROSS POST NO. 9610 VETERANS OF FOREIGN  
GN WARS OF THE UNITED STATES, INC.**



Principal Place of Business

**354 TENTH STREET  
LAKE PARK FL 33403**

Mailing Address

**354 TENTH STREET  
LAKE PARK FL 33403**

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 **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BALDWIN, GEORGE W  
330 U.S. HWY 1  
LAKE PARK FL 33403**

7. Name and Address of New Registered Agent

Name **Jack McDermott**

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

**354 Tenth Street**

**Lake Park, Florida 33403**

City

**FL**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Jack McDermott**

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

(NOTE: Registered Agent signature required when reinstating)

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete  
NAME **BRENNAN, JOHN**  
STREET ADDRESS **9706 SANDY RUN RD**  
CITY-ST-ZIP **JUPITER FL 33478**

TITLE **VD** ☒ Delete  
NAME **CULLEN, TOM**  
STREET ADDRESS **9175 165TH PLACE**  
CITY-ST-ZIP **JUPITER FL 33478**

TITLE **TD** ☒ Delete  
NAME **MEARES, DON LTC**  
STREET ADDRESS **382 LIGH HOOSE DR**  
CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE **TD** ☒ Delete  
NAME **SUTTON, ALLEN**  
STREET ADDRESS **736 PROSPERITY FARMS RD**  
CITY-ST-ZIP **NORTH PALM BEACH FL 33408**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Change ☒ Addition  
NAME **Tom Cullen**  
STREET ADDRESS **354 Tenth Street**  
CITY-ST-ZIP **Lake Park, FL 33403**

TITLE **VD** ☐ Change ☒ Addition  
NAME **Chuck Balius**  
STREET ADDRESS **354 Tenth Street, Lake Park, FL**  
CITY-ST-ZIP **33403**

TITLE **TD** ☐ Change ☒ Addition  
NAME **Jack McDermott**  
STREET ADDRESS **354 Tenth Street, Lake Park, FL**  
CITY-ST-ZIP **33403**

TITLE **SD** ☐ Change ☒ Addition  
NAME **Don Meares**  
STREET ADDRESS **354 Tenth Street**  
CITY-ST-ZIP **Lake Park, FL 33403**

TITLE ☐ Change ☐ Addition  
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: **Jack McDermott** **2-22-03** 561-848-2500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)