

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90039 003 ****61.25

DOCUMENT # 771248

1. Entity Name

EVERGLADES POST 20 INC.



Principal Place of Business

101 S.E. AVENUE D
BELLE GLADE FL 33430

Mailing Address

P.O. BOX 1002
BELLE GLADE FL 33430



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-1092007

Applied For

No: Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MILLS, BOBBY C
36 LAKESIDE CIRCE
PAHOKEE FL 33476

7. Name and Address of New Registered Agent

Name

Frank G Primmer

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

1140 North East 25th St.

City

Belle Glade,

FL 33430

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

Frank G Primmer

Finance Officer! C.F.O.

March 26, 2008
Frank G. Primmer

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

(NOTE: Registered Agent signature is required when reappointing)

DATE

FILE NOW - FEE IS \$61.25
Due By May 1, 2008

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 CD ☐ Delete
NAME MILLS, BOBBY C
STREET ADDRESS 36 LAKESIDE CIRCLE
CITY-STATE-ZIP PAHOKEE FL 33476

TITLE ADJD ☐ Delete
NAME PRIMMER, FRANK G
STREET ADDRESS 1140 NE 25TH ST.
CITY-STATE-ZIP BELLE GLADE FL 33430

TITLE FD ☐ Delete
NAME MAROTTA, RALPH J
STREET ADDRESS 518 E. ESPERANZA AVE.
CITY-STATE-ZIP CLEWISTON FL 33440

TITLE BA ☐ Delete
NAME BAHURUTH, CHARLES
STREET ADDRESS P.O. BOX 511
CITY-STATE-ZIP CANAL POINT FL 33438

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Executive Committeeman ☒ Change ☐ Addition
NAME MILLS, BOBBY C
STREET ADDRESS 36 Lakeside Circle
CITY-STATE-ZIP PAHOKEE FL 33476

TITLE Finance Officer ☒ Change ☐ Addition
NAME Primmer, Frank G.
STREET ADDRESS 1140 NE 25th St.
CITY-STATE-ZIP Belle Glade, FL 33430

TITLE Executive Committeeman ☒ Change ☐ Addition
NAME Marotta, Ralph J.
STREET ADDRESS 518 ESPERANZA AVE.
CITY-STATE-ZIP Clewiston, FL 33440

TITLE Vice Commander ☐ Change ☐ Addition
NAME BAHURUTH, CHARLES
STREET ADDRESS P.O. BOX 511
CITY-STATE-ZIP Canal Point, FL 33438

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Frank G Primmer C.F.O.* Finance Officer March 26, 2008 5619929537