OR PROFIT CORPORATION ORM BUSINESS REPORT (UBŘ)

DOCUMENT # NO 100000 2762 DAVA S/Sqt. WILLIAM E. HILL, Unit #87, INC



FILED

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SECRETARY OF STATE TATLAHASSEF, FLORIDA

DO NOT WRITE IN THIS SPACE

400011792704 02/04/03--01080--014 **122.50 2. Principal Place of Business 3. Mailing Address 915 Chula 510 Mont Clair Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #. etc. Applied For City & State City & State 4. FEI Number 237331163 Not Applicable LEES DURG. LαΚε Ladu Country \$8.75 Additional Country 5. Certificate of Status Desired 32159 7. Name and Address of Current Registered Agent FLORENCE M-WALDRON DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 915 Chula Court Zip Code 3 2 / 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaling) DATE Make Check Pavable to 9. Election Campaign Financing \$5.00 May Be FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees Initial or Amended UBR OFFICERS AND DIRECTORS 10. COMMONDER ПΠЕ D Charla TRENKLE NAME NAME 1008 SIERRA Blanca Court STREET ADDRESS STREET ADDRESS Lady Lake, FL 32159 Sr. VICE Commander CITY-ST-ZIP CITY-ST-7F TITLE D Kathryn Wooten NAME NAME 15236 Ferndale Road STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FERNdale, FL 34729 TITLE " BILE Jr VICE Commander D WILLIE B HAWKINS NÂME NAME 21827 King HENRY AVENUE STREET ADDRESS STREET ADDRESS DO NOT WRI CITY-ST-7IP CITY ST- ZIP LEES burg, FL 34748

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 turther certify that the information indicated on this report or supplied entering 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 on an attachment with an address

TITLE NAME

TITLE

SMASS

TITLE

STREET ADDRESS

CITY-ST-ZIP .

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NAME -

STREET ADDRESS CITY ST-ZIP

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CITY-ST 782

CITY ST ZIP

CITY-ST-ZIP

CR2E037B (12/02)

Attachment# 100 1000002762

January 14, 2003

Uniform Business Report Division of Corporations PO Box 1500 Tallahassee, FL 32302-1500

I am applying for a waiver for reinstatement for failure to file the 2002 Not For Profit UBR Report Form.

As Adjutant/Treasurer for S/Sgt Wm E Hill, Unit 87 I filled out all the paperwork and obtained the proper signatures etc and the Auxiliary was incorporated on April 16, 2001. When the completed forms came in I promptly placed them in the file.

While attending the annual Mid Winter Conference for the DAV this weekend it was brought to our attention that we are required to file the UBR Report and should have received the proper forms in the past two weeks. I have not received the forms.

In reviewing my original documents for Incorporating I have listed the Chapter home as the mailing address instead of my address. As Adjutant for the Unit I receive all mail and should have listed it that way.

I would never deliberately not file a report. I very diligently fill out my "Solicitations of Contributions Registration Statement" Chapter 496, Florida Statues. I am deeply sorry for this oversight. As we are a small Unit and every dollar is dear in our efforts to aid Disabled Veterans I appeal to you to grant our request for a waiver. I am enclosing the completed reinstatement form for 2002 and the 2003 form along with a check in the amount of \$122.50.

Thank you for your consideration.

Florence M Waldron

Respectfully,

Florence M. Waldron

Adjutant DAVA Unit 87