

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02943

**FILED**  
**Oct 28, 2010**  
**Secretary of State**

**Entity Name:** CHARLES J. TAYLOR POST NO. 4360 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

**Current Principal Place of Business:**

217 ALEMEDA DR.  
PALM SPRINGS, FL 33461 US

**New Principal Place of Business:**

**Current Mailing Address:**

217 ALEMEDA DR.  
PALM SPRINGS, FL 33461 US

**New Mailing Address:**

**FEI Number:** 23-7068024      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HOLST, PHILIP E.Q.M  
217 ALEMEDA DR.  
PALM SPRINGS, FL 33461 US

**Name and Address of New Registered Agent:**

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:** PHILIP E. HOLST

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** QM  
**Name:** HOLST, PHILIP E  
**Address:** 217 ALEMEDA DR.  
**City-St-Zip:** PALM SPRINGS, FL 33461

**Title:** CMND  
**Name:** DAHL, DARREL  
**Address:** 217 ALEMEDA DR.  
**City-St-Zip:** PALM SPRINGS, FL 33461

**Title:** SRV.  
**Name:** FORTONBACHER, FLOYED W  
**Address:** 217 ALEMEDA DR.  
**City-St-Zip:** PALM SPRINGS, FL 33461

**Title:** CHST  
**Name:** SNOW, MICHAEL  
**Address:** 217 ALEMEDA DR.  
**City-St-Zip:** PALM SPRINGS, FL 33461

**Title:** JRV.  
**Name:** WEISS, RAYMOND  
**Address:** 217 ALEMEDA DRIVE  
**City-St-Zip:** PALM SPRINGS, FL 33461

**Title:** ADJ.  
**Name:** BAUMBARTEN, EARL  
**Address:** 217 ALEMEDA DRIVE  
**City-St-Zip:** PALM SPRINGS, FL 33461

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** PHILIP E. HOLST

Electronic Signature of Signing Officer or Director

QTRM

10/28/2010

Date