

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

05 MAR -7 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03032005 Chg-NP CR2E037 (10/03) 05

DOCUMENT # N03000002945

1. Entity Name
AMVETS POST 20 OF PERRY, INC.



Principal Place of Business
123 E NANCY ST
PERRY, FL 32347

Mailing Address
123 E NANCY ST
PERRY, FL 32347

2. Principal Place of Business

2499 WOODS CREEK ROAD

Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 505 1974

Suite, Apt. #, etc.

City & State

PERRY, FL

Zip

32348

Country

City & State

PERRY, FL

Zip

32348

Country

4. FEI Number

41-2073058

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FOSTER, BRUCE R
123 E NANCY ST
PERRY, FL 32347

7. Name and Address of New Registered Agent

Name

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

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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 D
NAME FOSTER, BRUCE R
STREET ADDRESS 123 E NANCY ST
CITY-ST-ZIP PERRY, FL 32347 ☐ Delete

TITLE D
NAME NOBLES, LARRY A
STREET ADDRESS 109 TIPPETT DR
CITY-ST-ZIP PERRY, FL 32348 ☒ Delete

TITLE D
NAME PAGE, DANIEL G
STREET ADDRESS 3592 WHIPPOORWILL WAY
CITY-ST-ZIP PERRY, FL 32347 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME FRANKLIN, DODD
STREET ADDRESS 3548 WOODS CREEK ROAD
CITY-ST-ZIP PERRY, FL 32348 ☒ Change ☐ Addition

TITLE D
NAME HATTON, JOHN R.
STREET ADDRESS 3507 POLEY CUT-OFF ROAD
CITY-ST-ZIP PERRY, FL 32348 ☒ Change ☐ Addition

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

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

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

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

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:

BRUCE R. FOSTER *Bruce R. Foster*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH 5, 2005 850-838-3328

Date

Daytime Phone #