

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N03000004204



1. Entity Name
THE MEN'S AUXILIARY UNIT OF THE GREATER
BEACHES POST 3270, VETERANS OF FOREIGN WARS
OF THE UNITE

Principal Place of Business
915 8TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250

Mailing Address
915 8TH AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05112006 Chg-NP CR2E037 (4/06)

City & State

City & State

4. FEI Number
16-1680987

Applied For
Not Applicable

Zip

Zip

Country

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

O'NEILL, KAREN B
1009 21ST STREET NORTH
JACKSONVILLE BEACH, FL 32250

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 renesting)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

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

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TRD
NAME MATHIS, HAROLD G
STREET ADDRESS 2140 FEATHERWOOD DRIVE W
CITY-ST-ZIP ATLANTIC BEACH, FL 32233

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE TD
NAME STONE, KIRK L
STREET ADDRESS 929 12TH STREET NORTH
CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE PD
NAME SULLIVAN, NORMAN
STREET ADDRESS 2077 CORONA COURT
CITY-ST-ZIP JACKSONVILLE, FL 32224

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD Buydasz, Steve
712 9th street South
Jacksonville Beach, fl. 32250

Change Addition

TITLE VD
NAME BARKER, MICHAEL W JR.
STREET ADDRESS 1103 SEABREEZE AVENUE
CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD. Carol Morrison
1620 2nd Street North
Jacksonville, Beach, fl. 32250

Change Addition

TITLE SD
NAME BUYDASZ, STEVE
STREET ADDRESS 712 9TH STREET SOUTH
CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD Sullivan, Norman
2077 Corona Court.
Jacksonville, fl. 32224.

Change Addition

TITLE D
NAME JOHNSON, GERALD
STREET ADDRESS 203 BAY STREET
CITY-ST-ZIP NEPTUNE BEACH, FL 32266

Delete

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 exemptions contained in Chapter 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: *Kirk L Stone*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/11/06 904-759-1552

Date

Daytime Phone #

**FILED
May 18, 2006 8:00 am
Secretary of State**

05-18-2006 90015 046 ****61.25