

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05449

FILED
Apr 20, 2004
Secretary of State

Entity Name: MAJOR WALTER W. PRICE POST 9697, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

5484 GRIFFIN ROAD
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

5484 GRIFFIN ROAD
DAVIE, FL 33314

New Mailing Address:

FEI Number: 59-2431049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRATA, BOB
5484 GRIFFIN ROAD
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

RUDDY, BILL
5484 GRIFFIN ROAD
DAVIE, FL 33314 US

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: BILL RUDDY

04/20/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PRATA, ROBERT
Address: 4167 S.W. 87TH TERRACE
City-St-Zip: DAVIE, FL

Title: D () Delete
Name: CASSELS, LARRY
Address: 3100 SW 52ND TERRACE
City-St-Zip: DAVIE, FL 333141941

Title: D () Delete
Name: STRICKLIN, EDWARD D
Address: 9341 NW 39 ST
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RUDDY, BILL
Address: 6130 SW 39TH COURT
City-St-Zip: DAVIE, FL 33314

Title: D (X) Change () Addition
Name: WEATHERFORD, JAMES
Address: 2200 CYPRESS BEND DRIVE #602
City-St-Zip: POMPANO BEACH, FL 33069

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: EDWARD D STRICKLIN

D

04/20/2004

Electronic Signature of Signing Officer or Director

Date