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Jan 27 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N07463 (5)

1. Corporation Name

WILLIAM A. MCALLISTER POST NO. 1608 VETERANS OF  
FOREIGN WARS OF THE UNITED STATES, INC.

Principal Place of Business

Mailing Address

V.F.W. POST 1608, 2750 SW 16TH ST.,  
MIAMI FL 33145V.F.W. POST 1608, 2750 SW 16TH ST.,  
MIAMI FL 331453. Date Incorporated or Qualified  
02/05/19853a. Date of Last Report  
06/12/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number  
59-0685762Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes



No

## 9. Name and Address of Current Registered Agent

HOPE, BEN F.  
2750 SW 16TH ST.  
MIAMI FL 33145

## 10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

BEN F. HOPE

Ben F. Hope

1-7-97

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

(NOTE: Registered Agent signature required when relistening)

DATE

## 12. OFFICERS AND DIRECTORS

TITLE D  
NAME GONZALEZ, RAUL  
STREET ADDRESS 6731 SW 5 TERR.  
CITY-ST-ZIP MIAMI FL☐ DELETETITLE D  
NAME HARTMAN, JOHN R.  
STREET ADDRESS 310 SW 30 CT.  
CITY-ST-ZIP MIAMI FL☐ DELETETITLE D  
NAME HOPE, BEN F.  
STREET ADDRESS 2370 SW 26 ST.  
CITY-ST-ZIP MIAMI FL☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETE

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

BEN F. HOPE  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-97 (305) 445-3455

Date

Daytime Phone # 0078400

CR2E037 (9/96)