

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002527

FILED  
Jul 01, 2012  
Secretary of State

**Entity Name:** AMVETS RIDERS INC., WILLIAM CROW CHAPTER 447

**Current Principal Place of Business:**

504 E HWY 40  
INGLIS, FL 34449

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1217  
INGLIS, FL 34449

**New Mailing Address:**

**FEI Number:** 26-4180817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BINEGAR, BRENDA  
11592 W. DEODER ST.  
CRYSTAL RIVER, FL 34428 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MAZUR, TOM  
Address: 2675 W. VESPERE ST  
City-St-Zip: DUNNELLON, FL 34433

Title: VICE  
Name: BINEGAR, BRENDA  
Address: 11592 W. DEODER ST.  
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: TREA  
Name: CASSADY, CHARLES  
Address: PO BOX 36  
City-St-Zip: INGLIS, FL 34449

Title: SEC  
Name: WHITE, JOLENE  
Address: 325 S. INGLIS AVE  
City-St-Zip: INGLIS, FL 34449

Title: SERG  
Name: STARK, JOHN  
Address: 10173 N. SUNCOAST BLVD LOT # 128  
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: CHAP  
Name: BOYMER, LYNDIA  
Address: 12150 SE 67 PL  
City-St-Zip: MORRISTON, FL 32668

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: BRENDA BINEGAR

VICE

07/01/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date