

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State

0059588

DOCUMENT # N12289

1. Entity Name

AMERICAN EX PRISONERS OF WAR DEPARTMENT OF FLORI

03-05-2001 90304 027 ****61.25

Principal Place of Business
 6117 LIBERTY AVE
 TEMPLE TERR FL 33617
 US

Mailing Address
 6117 LIBERTY AVE
 TEMPLE TERR FL 33617
 US

2. Principal Place of Business
 346 Rosario St.

3. Mailing Address
 346 Rosario Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 Punta Gorda, Florida

City & State
 Punta Gorda, Florida

4. FEI Number
 59-2445954

Applied For

Not Applicable

Zip
 33983

Country
 Charlotte

Zip
 33983

Country
 Charlotte

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEMENT, EDWARD L
 6117 LIBERTY AVE
 TEMPLE TERR FL 33617

Name
 Julie Little
 Street Address (P.O. Box Number is Not Acceptable)
 346 Rosario Street
 City
 Punta Gorda, FL Zip Code
 33983

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.

SIGNATURE Julie Little, Treasurer

Julie Little, Treasurer

2-27-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
 NAME WELLS, WILLIAM A
 STREET ADDRESS 137 MAPLE LANE
 CITY-ST-ZIP LAKE HELEN FL 32744

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

TITLE T ☒ Delete
 NAME DEMENT, EDWARD L
 STREET ADDRESS 6117 LIBERTY AVE
 CITY-ST-ZIP TEMPLE TERR FL 33617

TITLE T ☒ Change ☐ Addition
 NAME Julie Little
 STREET ADDRESS 346 Rosario Street
 CITY-ST-ZIP Punta Gorda, Florida 33983-5852

TITLE S ☒ Delete
 NAME RAZVOZA, NANCY
 STREET ADDRESS 73 CORNELIUS BLVD
 CITY-ST-ZIP PT CHARLOTTE FL 33753-4544

TITLE S ☒ Change ☐ Addition
 NAME Claire Fournier
 STREET ADDRESS 6290 Pinehurst Drive
 CITY-ST-ZIP Spring Hill, Florida 34606

TITLE D ☐ Delete
 NAME KLEIN, JOSEPH
 STREET ADDRESS 14803 CORTLAND DRIVE
 CITY-ST-ZIP HUDSON FL 34667

TITLE V ☐ Change ☒ Addition
 NAME DeVern Little
 STREET ADDRESS 346 Rosario Street
 CITY-ST-ZIP Punta Gorda, Florida 33983-5852

TITLE P ☐ Delete
 NAME RAZVOZA, RICHARD
 STREET ADDRESS 73 CORNELIUS BLVD
 CITY-ST-ZIP PT CHARLOTTE FL 33953-4544

TITLE D ☒ Change ☐ Addition
 NAME Richard Razvoza
 STREET ADDRESS 73 Cornelius Blvd.
 CITY-ST-ZIP Port Charlotte, Florida 33953-

TITLE D ☐ Delete
 NAME PATTERSON, JOSEPH
 STREET ADDRESS 760 KINGSTON CT
 CITY-ST-ZIP APOLLO BEACH FL 33572-2429

TITLE P ☒ Change ☐ Addition
 NAME Joseph Patterson
 STREET ADDRESS 760 Kingston Court
 CITY-ST-ZIP Apollo Beach, Florida 33572-2429

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: *Julie Little* REQUIRED Julie Little

2-27-01

941-629-4955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)