2003 NOT-FOR-PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N18806

1. Entity Name



Apr 25, 2003 8:00 am § Secretary of State 04-25-2003 90216 032 ****61.25

FILED

BAYONET POINT POST #7631 VETERANS OF FOREIGN WAR S OF THE UNITED STATES, INC.			
Principal Place of Business	Mailing Address		

0 01 1110	- ONTED OTATEO, INC.		GO WE TO						
Principal Place 13129 COLONY HUDSON FL 3	· · · · -	Mailing Address 13129 COLONY RD HUDSON FL 34669	· -						
2 Principal F	Place of Business	3. Mailing Address	. 						
2. Principal Place of Business 3. Mailing Address			1 100111101 031 11	t vermiser fill stadt verm verm same ern kreit erni erni erni erni erni erni erni erni					
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.				Z CHECK HERE IF MAKING CHANGES				
City & Stat	City & State City & State			4. FEI Number 5	4. FEI Number 59-2707826 Applied For Not Applicable				
Zip	Country	Zip	Country	5. Certificate of Si	atus Desired	\$8.75 Add			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
			Name_	Name TRIPP. HARRY					
SPRINGSTEEN, WILLIAM H JR.			Street Add	Street Address (P.O. Box Number is Not Acceptable)					
	DLONY RD		/3/	13/29 COLONY KD					
HUDSON	FL 34669			•					
				DSON	F	<u> </u>	69		
	named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office or reg	gistered agent, or both, in	the State of Florida. I an	n familiar with,	and accept		
tilo obligat	tions of registered agent.		1/1	7-1	الميد	20/02	,		
SIGNATURE A	HARRY TRIPP		Harry	- IAURA	7/0	W 100	L		
0.0.0.0.0.0	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE	: Registered Agent signate o	equired when reinstate)	DATE	7			
				-	<u></u>				
	FILE NOW: FEE IS \$61.25		npaign Financing	\$5.00 May Be		ck Payable			
	*	Trust Fund C	contribution.	Added to Fees	Florida-Depa	artment of S	itate		
10.	OFFICERS AND D	DECTORS	11.	ADDITIONS (CHANG	ES TO OFFICERS AND D	DIRECTORS IN	10		
TITLE	QM ,	Delete	TITLE QM	ADDITIONS/CHANG	ES TO OFFICERS AND I	Change	Addition		
NAME	SPRINGSTEEN, WILLIAM	El Delete	NAME 7	RIPP HARRY 3124 COLONY	, 20	E change			
STREET ADDRESS	11511 SMITH BLVD.		STREET ADDRESS /	3124 COLONY	,		Ì		
CITY-ST-ZIP	HUDSON FL 34667		CITY-ST-ZIP	INDSON FAR	34669]		
TITLE	С	Delete	TITLE C			Change	Addition		
NAME	MOLHOLLAND, JERRY		NAME /	MACDONALD, 5	TEUE		}		
STREET ADDRESS	13331 WRENWOO CIRCLE	-	STREET ADDRESS	1831 OSECOL	HEY FC 346	::::::::::::::::::::::::::::::::::::::			
CITY-ST-ZIP	HUDSON FL 34669		CITY-ST-ZIP	VEW PART RICE	vey FC 346				
TITLE	VP	Delete	1.1.6.2	PAKURE JO	SEPH	Change Change	☐ Addition		
NAME STREET ADDRESS	MCDONALD, STEVE 9831 OSCEOLA DR		NAME STREET ADDRESS	2129 COLORY	23				
CITY-ST-ZIP	NEW PORT RIETTEG FL 34654		CITY-ST-ZIP	1129 COLODY NDSON FLAS	1669				
TITLE	T	Delete	TITLE -T	Described to the second	,,,,	Change	Addition		
NAME	BALL, CHARLES D JR	C Delete	1 marc	TOHN LEE					
STREET ADDRESS	13129 COLONY RD		STREET ADDRESS	07 TORONZO	LN				
CITY-ST-ZIP	HUDSON FL 34669		CITY-ST-ZIP	YEW POET RIC	HEU 34654	,			
TITLE	T	Delete	TITLE TU	INCE REG	A .	Change	Addition		
NAME	FALKNER, JOSEPH		NAME 5	ond Let 07 Tolon 20 1200 POET RIC 11NCE REG 1340-3 High BET KILHEY H	POINT CIRCLE	<u>-</u>	-		
STREET ADDRESS	13129 COLONY RD		STREET ADDRESS	2 - 1 - 1	CL. OILLOW				
CITY-ST-ZIP	HUDSON FL 34669		CITY-ST-ZIP	OCT KICHEY +	4097				
TITLE	TOIDD LIADDY	Delete	TITLE	ON MOOKE		Change	Addition		
NAME	TRIPP, HARRY		NAME ADDRESS AS	DA PILOURE	SIG Kinger				
STREET ADDRESS CITY-ST-ZIP	13129 COLONY RD		STREET ADDRESS CITY-ST-ZIP	1725 LIGHT	0 2/1/1		7		
0111-01-21	HUDSON FL 34669		■ OH 1-31-ZIF	TUDOW PU	ァ コタレルタ				

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:

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