

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 26, 2000 8:00 am**  
**Secretary of State**

01-26-2000 90035 008 \*\*\*\*61.25

**DOCUMENT # N33476**

1. Entity Name

**WEST HOLLYWOOD POST #308, INC.**

Principal Place of Business

725 N. 64TH AVE.  
HOLLYWOOD FL 33024-7700  
US

Mailing Address

725 N. 64TH AVENUE  
HOLLYWOOD FL 33024-7700

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**59-6200349**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HULING, GEORGE**  
**7080 WILSON STREET**  
**HOLLYWOOD FL 33024**

7. Name and Address of New Registered Agent

Name

**Bochenneck, Leo J.**  
Street Address (P.O. Box Number is Not Acceptable)

**5792 SW 35 Ave.**

**Hollywood**

City

**FL**

Zip Code

**33312**

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

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

TITLE ☐ Delete

NAME **DP**  
STREET ADDRESS **KRUG, LUCILLE**  
CITY-ST-ZIP **2210 TAYLOR STREET #106**  
**HOLLYWOOD FL**

TITLE ☐ Delete

NAME **DV**  
STREET ADDRESS **GLADWIN, PATRICK**  
CITY-ST-ZIP **8421 NW 7TH CT.**  
**PEMBROKE PINES FL**

TITLE ☐ Delete

NAME **DV**  
STREET ADDRESS **BOCHENECK, LEO J**  
CITY-ST-ZIP **5792 SW 35 AVENUE**  
**HOLLYWOOD FL**

TITLE ☒ Delete

NAME **SD**  
STREET ADDRESS **ECKLEY, PAUL C.**  
CITY-ST-ZIP **6661 DOUGLAS STREET**  
**HOLLYWOOD FL**

TITLE ☒ Delete

NAME **DT**  
STREET ADDRESS **HULING, GEORGE**  
CITY-ST-ZIP **7080 WILSON STREET**  
**HOLLYWOOD FL**

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME **DS**  
STREET ADDRESS **Bochenneck, Leo J.**  
CITY-ST-ZIP **5792 SW 35 Ave.**  
**Hollywood FL**

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition

NAME **DT**  
STREET ADDRESS **Pennetti, Michael**  
CITY-ST-ZIP **5731 SW 33 Ave.**  
**Ft. Lauderdale FL 33312**

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:

**Lucille R. Krug R.**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1/20/2000 954-925-3461**