

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # N33476

1. Entity Name
WEST HOLLYWOOD POST #308, INC.



Principal Place of Business
17005 NW 32ND AVE
OKEECHOBEE, FL 34972 US

Mailing Address
P.O. BOX 6005
HOLLYWOOD, FL 33081 US



04172007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-6200349	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VIRGIL, CAROLYN M
17005 NW 32ND AVE
OKEECHOBEE, FL 34972

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Robert A. Young *RV*

04/17/07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP VIRGIL, CAROLYN 17005 NW 32ND AV E OKEECHOBEE, FL 34973
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV YOUNG, ROBERT 720 NW 71ST AVE HOLLYWOOD, FL 33024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S NOVAK, BRUCE 4262 SW 89 DR FORT LAUDERDALE, FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WENZEL, LAWRENCE 6018 SW 18 ST. MIRAMAR, FL 33023
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PERKINS, CHARLES 17440 NW 38 AVE OKEECHOBEE, FL 34972
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000725375
05/03/07-80020-006 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

[Signature]

Robert A Young

04/17/2007 9542981242

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #