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May 22 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N34743 (7)

1. Corporation Name

FLORIDA DISTRICT, 369TH VETERANS ASSOCIATION, IN
C.

Principal Place of Business

Mailing Address

P.O. BOX 10657
ST. PETERSBURG FL 33733-0657
US

P.O. BOX 10657
ST. PETERSBURG FL 33733-0657
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOBSON, ASHBY B.
115 3RD ST, W
TERRA VERDE FL 33715

81 Name James E. Elliott III
82 Street Address (P.O. Box Number is Not Acceptable)
83 2143 Desoto Way
84 City ST. Petersburg FL 85 Zip Code 33712

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE James E. Elliott III

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

(NOTE: Registered Agent signature required when reinstating)

DATE

March 21, 1998

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME HOBSON, ASHBY B.
STREET ADDRESS 115 3RD ST, W
CITY-ST-ZIP TERRA VERDE FL
☒ DELETE

TITLE V
NAME NUSOM, HERBERT
STREET ADDRESS 16212 CASHMERE AVE
CITY-ST-ZIP PORT CHARLOTTE FL
☒ DELETE

TITLE V
NAME BROWN, JAMES B
STREET ADDRESS 8334 COLMA STREET
CITY-ST-ZIP SPRING HILL FL
☒ DELETE

TITLE SD
NAME HOBSON, RONALDA
STREET ADDRESS 115 3RD ST, W
CITY-ST-ZIP TERRA VERDE FL
☐ DELETE

TITLE TD
NAME CAMBLE, FRED
STREET ADDRESS 2500 18TH AVE. SOUTH
CITY-ST-ZIP ST PETERSBURG FL
☐ DELETE

TITLE D
NAME BUTLER, LEONARD
STREET ADDRESS 370 NE ITHACA ST
CITY-ST-ZIP PORT CHARLOTTE FL
☐ DELETE

1.1 TITLE PD
1.2 NAME James E. Elliott III
1.3 STREET ADDRESS 2143 Desoto Way
1.4 CITY-ST-ZIP ST. Petersburg FL 33712
☒ Change ☐ Addition

2.1 TITLE V
2.2 NAME Godfrey A. Martin
2.3 STREET ADDRESS 10105 Arrow Creek Rd.
2.4 CITY-ST-ZIP New Port Richey, FL 34655
☒ Change ☐ Addition

3.1 TITLE D
3.2 NAME Arthur P. Gittens
3.3 STREET ADDRESS 3257 Aldoro Ave.
3.4 CITY-ST-ZIP Spring Hill, FL 34609
☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (10/97)