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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

## DOCUMENT # N36057 1. Corporation Name ALLIED VETERANS OF THE WORLD, INC. AND AFFILIATE S POST #2

Principal Place of Business 1302 PONCE DE LEON BLVD ST. AUGUSTINE FL 32084

Mailing Address

650 W. POPE RD., APT. 245 ST. AUGUSTINE FL 32084

## **FILED** Feb 04, 1999 8:00am **Secretary of State**

02-04-1999 90011 049 \*\*\*\*61.25



	· .				3. Date Incorporated or Qualifed			
2. Principal Place of Business 2a. Mailing Address					01/11/1990			
2. Principal Place of Business 26		26			4. FEI Number	Applied	For	
Suite Ant. #, etc.				59-3145785		Not Ap	plicable	
Suite, Apt. #, etc.						\$8.75 Addi	tional	
City & State					5. Certificate of Status Desired	Fee Requi	Fee Required	
City & State			_			\$5.00 Ma	v Be	
700			Country		6. Election Campaign Financing	Added to F		
Zip	Zip Country 30			Trust Fund Contribution Added to Fees  10. Name and Address of New Registered Agent				
J	25				10. Name and Address of New Registe	ten viene		
9.	Name and Address of Current	Kedistelen våen:	81	Name				
	A State was not been a		L		ress (P.O. Box Number is Not Acceptable)		1	
ODOCCHANI, HADOLD, com por control topo of the Court of the Court				82 Street Address (P.U. Box Number is 1107.				
GROSSMAN, HAROLD OF THE WORLD, MIC. AND A FELIANT			100	83				
650,W. POPE RD., APT. #245				<b>^</b>		Jasi Zin Cor	10	
ST. AUGUSTINE FL 32084			84	84 City FI 85 Zip Code			~	
12				1 -	ha a management and a second	se of changing its re	gistered	
The second of the second	247.050	2 and 617 1508 Florida Statutes,	the abo	ve-named cor	poration submits this statement for the purporation's board of directors: hereby accept the	appointment as regis	tered	
11. Pursuant to th	he provisions of Sections 617.050	of Florida. Such change was autho	orized b	y the corpora	tion's board of disording		B(Cs32)	
office or regis	stered agent, or both, in the State of amiliar with, and accept the obligat	ions of, Section 617.0503, Florida	Statute	<b>55.</b>	· /->	> <u>- {                                   </u>		
	CHI LAN ANA		alutored Ac	ent signature requi	ired when reinstating)  DA	TE DIDECTOR	S IN 12	
SIGNATURE	nature, typed or printed name of registered agen	If BITO 000 II wyp	13.	park signoral s	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	Addition	
12.	OFFICERS AN	D DIRECTORS			52.141203	Change		
	T	☐ DELETE	1,1 TITLE		The Forest			
	ROSSMÁN, HAROLD		1.2 NAME		S0 314 7785 .			
NAME G	HUSSWAN, HANGED	•	1.3 STREET ADDRESS			<i>i</i> .		
STREET ADDRESS 6	50 W POPE ROAD #245	· ·	1.4 CITY	/-ST-ZIP		Change	Addition	
CITY-ST-ZIP S	T. AUGUSTINE FL 32084	☐ DELETE	2.1 TITL	E				
TITLE T			22 NAM	AE				
NAME B	BISHOP, RANDY			REET ADDRESS				
STREET ADDRESS			•	Y-ST-ZIP			- Addition	
ما ا	CT ALIGHSTINE FL 32086		_			_ ☐ Change	Addition	
	DT	☐ DELETE	3.1 T∏	1		<del>-</del>		
	DUNCAN (JOHNNY / 1/4 ) (G	of the second of the second	3.2 NA			•		
NAME ROSSIA	DUNCAN DON'S	提供的 医克勒氏管 化二甲基甲基苯基	3.3 ST	REET ADDRESS				
	694 ALEIDA DRIVE		3.4. CF	TY-ST-ZIP		Change	☐ Additio	
CITY ST-ZIP	ST. AUGUSTINE FL 32086	☐ DELETE	4.1 10	LE				
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NAME SONGE				L		1,31	: : ACCITIO	
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14. hereby cartify 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 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 that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplemental annual report is true and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report is true.