

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N37130

1. Entity Name

BRADFORD COUNTY MEMORIAL, POST NO. 1016, VETERAN
S OF FOREIGN WARS OF THE UNITED STATES, INC.

Principal Place of Business

250 N BAY ST.
STARKE FL 32091

Mailing Address

POST OFFICE BOX 367
STARKE FL 32091-0367

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2930629

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PEACE, DAVID
RT 4 BOX 809
STARKE FL 32091

7. Name and Address of New Registered Agent

Name

DAVIS, CHARLES

Street Address (P.O. Box Number is Not Acceptable)

RT 5, BOX 7613

City

STARKE,

FL

Zip Code

32091

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

Charles W. Davis

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE M
NAME PEACE, DAVID
STREET ADDRESS RT 4 BOX 809
CITY-ST-ZIP STARKE FL 32091 ☒ Delete

TITLE M
NAME DAVIS, CHUCK (CHARLES)
STREET ADDRESS RT 5, BOX 7613
CITY-ST-ZIP STARKE, FL 32091 ☐ Change ☒ Addition

TITLE D
NAME DAMPIER, WILLIAM E
STREET ADDRESS 5292 SE SR 100
CITY-ST-ZIP STARKE FL 32091 ☒ Delete

TITLE D
NAME JIM VAUGHN
STREET ADDRESS RT 4, BOX 2152
CITY-ST-ZIP LAKE BUTLER, FL 32054 ☐ Change ☒ Addition

TITLE D
NAME SEARCY, GARY
STREET ADDRESS 1257 NW 251ST STREET
CITY-ST-ZIP LAWTEY FL 32058 ☐ Delete

TITLE T
NAME FRANK CAMACHO
STREET ADDRESS P.O. BOX 245
CITY-ST-ZIP LAWTEY, FL 32058 ☐ Change ☒ Addition

TITLE S
NAME PEACE, CHRISTINE
STREET ADDRESS RT 4 BOX 809
CITY-ST-ZIP STARKE FL 32091 ☒ Delete

TITLE D
NAME OTTIS MCKINNEY
STREET ADDRESS 413 POLK ST
CITY-ST-ZIP STARKE, FL 32091 ☐ Change ☒ Addition

TITLE T
NAME BITANCOR, CARLA
STREET ADDRESS 3904 PEACH DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32246 ☒ Delete

TITLE D
NAME DAVE PEACE
STREET ADDRESS RT 4 BOX 809
CITY-ST-ZIP STARKE, FL 32091 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: *Dave Peace* DATE: 4/30/02 (904) 368-1420
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91269 038 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)