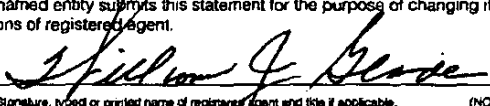
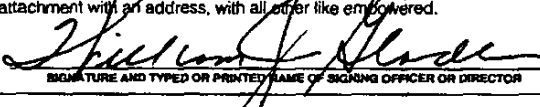


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2004 8:00 am
Secretary of State

04-19-2004 90719 014 ****13.75
05-07-2004 90117 014 ****47.50

DOCUMENT # N47204					
1. Entity Name CRESTVIEW, POST NO. 5450, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.					
Principal Place of Business 2240 W JAMES LEE BLVD CRESTVIEW FL 32536 US			Mailing Address 2240 W JAMES LEE BLVD CRESTVIEW FL 32536 US		
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 59-2898228	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BEIER, WILLIAM R 6023 DAIRY RD BAKER FL 32531			7. Name and Address of New Registered Agent Name: _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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, typed or printed name of registered agent and file if applicable.		DATE: 16 Apr 04	
FILE NOW: FEE IS \$61.05 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☒ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BEIER, WILLIAM R 6023 DAIRY RD BAKER FL 32531 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	WILLIAM S. GLADE ☒ Change ☐ Addition 5940 CREEKSIDE DR CRESTVIEW, FL. 32536		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV EARL, DAVID ☒ Delete 178 JOHN KING RD CRESTVIEW FL 32539	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AUDIE W. BEADLE ☒ Change ☐ Addition 1601 EUNICE LANE BAKER, FL 32531		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV EVERAGE, DON ☐ Delete PO BOX 129 MILLIGAN FL 32532	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BEIER, WILLIAM ☒ Delete 2240 W JAMES LEE BLVD CRESTVIEW FL 32536	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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: 		Signature and typed or printed name of signing officer or director		Date: 16 Apr 04 Daytime Phone # _____	