

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2003 8:00 am
Secretary of State

09-10-2003 90053 029 ****61.25

DOCUMENT # N92000000098

1. Entity Name

RAYMOND E. DARLING VFW POST 6023, INC.



Principal Place of Business
P.O. BOX 1320, MORGAN ROAD
INDIANTOWN FL 34956

Mailing Address
P.O. BOX 1320, MORGAN ROAD
INDIANTOWN FL 34956

2. Principal Place of Business

3. Mailing Address

16701 SW 95th St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Indiantown, FL

4. FEI Number **59-6111356**

Applied For
Not Applicable

Zip
34956

Country

Martin

Zip
34956

Country

Martin

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WITTENMYER, ERNEST
15935 SW OSCEOLA ST.
INDIANTOWN FL 34956

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

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 **VD** ☒ Delete
NAME **SLEZIA, JOHN**
STREET ADDRESS **16396 S.W. INDIANWOOD CIR**
CITY-ST-ZIP **INDIANTOWN FL**

TITLE **VD** ☐ Change ☒ Addition
NAME **Ralph Miller**
STREET ADDRESS **16701 SW Morgan St**
CITY-ST-ZIP **Indiantown, FL 34956**

TITLE **DS** ☐ Delete
NAME **MCLAUGHLIN, ROY**
STREET ADDRESS **1424 SW JEFFERSON AVE.**
CITY-ST-ZIP **INDIANTOWN FL**

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

TITLE **DP** ☐ Delete
NAME **WITTENMYER, ERNEST**
STREET ADDRESS **15935 OSCEOLA ST.**
CITY-ST-ZIP **INDIANTOWN FL**

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

TITLE **TD** ☒ Delete
NAME **COURTOIS, EDWARD J**
STREET ADDRESS **14602 S.W. DIVOT DR**
CITY-ST-ZIP **INDIANTOWN FL**

TITLE **TD** ☐ Change ☒ Addition
NAME **Kevin Stripling**
STREET ADDRESS **16701 SW Morgan St**
CITY-ST-ZIP **Indiantown FL 34956**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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: **Susana Ramirez (Secretary)** **Raymond E. Darling** **9/3/03 772 597-4096**

CR2E037 (4/03)