2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCI IMENT # N9200000210 THE SUA



1. Entity Name HERNANDO COUNTY POST NO. 8713 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.				08-14-2006 90040 009 ****70.00	
Principal Place of Business		Mailing Address		_	
1681 E JEFFERSON ST BROOKSVILLE FL 34605		VFW POST 8713 PO BOX 1796 BROOKSVILLE FL 34605			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		2nd MOORE	CR2E037 (4/06)
City & State		City & State		4. FEI Number 59-26444	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Currer	nt Registered Agent	<u> </u>	7. Name and Address of New	Registered Agent
47	WNSEND, WILLIAM G MARKHAM LANE DOKSVILLE FL 34601		Name 7 A a m A Street Address 6 6 3 5	G.O. Box Number is Not Acceptable Land of the C	e) Zip Code)
obligations	named entity submits this statement for of registered agent.	or the purpose of changing its re	gistered office or registered	agent, or both, in the State of Florida	a. I am familiar with, and accept the
SIGNATURE	Signature, typod or printed name of registered agent	and title if applicable. (NOT	E: Regulered Agent signature renvired	when roinstaling)	JY JOS
	FILE NOW: FEE IS \$61.25 Due By September 6, 2006	9. Election Can Trust Fund C	npaign Financing Contribution.		lake Check Payable to rida Department of State
10.	OFFICERS AND D	PIRECTORS 6	11.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-SI-ZIP	QM TOWNSEND, WILLIAM G 47 MARKHAM LANE BROOKSVILLE FL 34601	Delete	NAME STREET ADDRESS	n mas Thurman as Landovic	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COMM SPRDUTTI, MICHAEL B 26396 ROLLING ACRES DR BROOKSVILLE FL 34602	Delete	TITLE CONTROL TANKS STREET ADDRESS 205	nghill 34608 mm nes Simonetti sa Piranacolla hr soksvilla F1.3	∑⊠ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRV GREENE, ROBERT 26388 ROLLING ACRES DR. BROOKSVILLE FL 34602	Delete	NAME STREET ADDRESS 406		change
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JRV BEGGS, ROBERT P.O. BOX 1014 BROOKSVILLE FL 34605	Delete	TITLE TE	rm Loje wski 19 Meeting house Ln 50 Ks VIII F1, 34	Change Addition
TITILE NAME STREET ADDRESS CTTY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CTTY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-SI-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Ja