FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 19 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DO NOT WRITE IN THIS SPACE

DOCUMENT # N93000001149 (4)

1. Corporation Name
FROSTPROOF POST NO. 1980 VETERANS OF FOREIGN WAR S OF THE UNITED STATES, INC.

Principal Place of Business	Mailing Address
231 EAST WALL STREET FROSTPROOF FL 33843	231 EAST WALL STREET FROSTPROOF FL 33843

3. Date Incorporated or Qualified: 03/05/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2927234 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $5.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $60.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

JOHNSON, FLOYD A SR
231 E. WALL ST.
FROSTPROOF FL 33843

10. Name and Address of New Registered Agent

31 Name: RAYMOND M. THORNTON
32 Street Address (P.O. Box Number is Not Acceptable): 231 E. WALL STREET
33
34 City: FROST PROOF FL 35 Zip Code: 33843

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: RAYMOND M THORNTON 4/13/95
Signature, name or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	COMMANDER	☑ Change ☐ Addition
NAME	JOHNSON, FLOYD A	1.2 NAME	RAYMOND M. THORNTON	
STREET ADDRESS	6855 WEST BEREAH ROAD	1.3 STREET ADDRESS	16 PLATT Rd.	
CITY-ST-ZIP	FT.MEADE FL 33841	1.4 CITY-ST-ZIP	FROSTPROOF, FLA. 33843	
TITLE	DT	2.1 TITLE	QUARTERMASTER	☑ Change ☐ Addition
NAME	GILBREATH, ROBERT E	2.2 NAME	TEDDY R. TODD	
STREET ADDRESS	1350 OLD STOKES RD	2.3 STREET ADDRESS	801 HIGHWAY 27. SO. #22	
CITY-ST-ZIP	FROSTPROOF FL	2.4 CITY-ST-ZIP	LAKE WALES, FLA. 33843	
TITLE	DTR	3.1 TITLE		☐ Change ☐ Addition
NAME	BALL, ROBERT B	3.2 NAME		
STREET ADDRESS	231 SPURLOCK RD	3.3 STREET ADDRESS		
CITY-ST-ZIP	FROSTPROOF FL	3.4 CITY-ST-ZIP		
TITLE	DTR	4.1 TITLE		☐ Change ☐ Addition
NAME	SHEFFER, ROBERT C	4.2 NAME		
STREET ADDRESS	309 STANLEY AVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	FROSTPROOF FL	4.4 CITY-ST-ZIP		
TITLE	DTR	5.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, JAMES E	5.2 NAME		
STREET ADDRESS	159 MAXCY LN	5.3 STREET ADDRESS		
CITY-ST-ZIP	FROSTPROOF FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Teddy R. Todd TEDDY R. TODD 3-31-95 635-2211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #