2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2002 8:00 am
Secretary of State
02-01-2002 90047 019 ****70.00

DOCUMENT # N93000004376

1. Entity Name

AMVETS POST NO. 893, INC.

Principal Place of Business	Mailing Address
218 HARDEE LANE ROCKLEDGE FL 32955 US	218 HARDEE LANE ROCKLEDGE FL 32955 US

DO NOT WRITE IN THIS SPACE

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 59-3155051 ☐ Applied For ☐ Not Applicable

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
FANTACCIONE, THOMAS R 1900 BARRINGTON CIRCLE ROCKLEDGE FL 32955	Name: Joseph T. Heneghan Street Address (P.O. Box Number is Not Acceptable): 962 Revere Court City: Rockledge **FL** Zip Code: 32955

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 Joseph T. Heneghan, Post Commander 1/10/02
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

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TS HENEGHAN, JOSEPH T 962 REVERE CT ROCKLEDGE FL 32955-3592	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Heneghan, Joseph T. 962 Revere Court Rockledge, Florida 32955-3592	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GODBEY, KEVIN W 255 MAPLEWOOD BOULEVARD COCOA FL 32926	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Diaz, Alberto 3737 North U.S.#1 Highway Cocoa, Florida 32922	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MAURER, EDWARD R 1212 PRINCETON ROAD COCOA FL 32922	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PCD FANTACCIONE, THOMAS R 1900 BARRINGTON CIRCLE ROCKLEDGE FL 32955	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TM Fantaccione, Thomas R. 1900 Barrington Circle Rockledge, Florida 32955	☒ Change ☐ Addition
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

CR2E037 (9/01)

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: Joseph T. Heneghan SIGNATURE REQUIRED 1/10/02 321-636-2340
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #