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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF COMPORATIONS

1996
DOCUMENT #

N9400002079 (1)

JOE NIC BARCO MEMORIAL VFW POST 7122 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

## SIS SOUTH FLORIDA AIRNUE FLORIDA	FOREIGN WARS OF THE UNITED STATES, INC.							
Procedure Process Pr	Principal Place	of Business	Mailing Address				Uther Marker Angelon (1984) 1)
2. Principal Place of Business 2a. Melling Address 2. El Number 59-3213394 Applied For Sp-3213394 Applied For S			= =					
Suite, Apt. #, etc.						3. Date Incorporated or Qualified 04/26/1994		
City & State City	21		- ·			4. FEI Number 59-3213394		Applied For Not Applicable
28 29 29 20 29 30 30 30 30 30 30 30 3	22					5. Certificate of Status Desired	1 +	
28 29 30 Florida Statutes No Name and Address of Current Registered Agent 10. Name and Address of New Reg	23	····	 			, , ,		
HATTEN, SIDNEY L SR 8299 S. YEW TER FLORAL CITY FL 34436 11. Pursuant to the provisions of Sections 617 0502 and 617 1506, Fordia Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered familiar with, and accept the collegations of. Sections 617 0503, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered familiar with, and accept the collegations of. Sections 617 0503, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered pagent or both, in the State of Florida, Such drawn as a submitted by the corporation's board of decicions. Thereby accept the appointment as registered agent or both, in the State of Florida, Such drawn as a submitted by the corporation's board of decicions. Thereby accept the appointment as registered agent or both, in the State of Florida, Such drawn as a submitted by the corporation's board of decicions. Thereby accept the appointment as registered agent and acceptance of the collegations of the suppointment as registered agent and acceptance of the collegations of the suppointment as registered agent and acceptance of decicions. Thereby accept the appointment as registered agent and acceptance of decicions. Thereby accept the appointment as registered agent and acceptance of decicions. Thereby accept the appointment as registered agent and acceptance of decicions. Thereby accept the appointment as registered agent and acceptance of decicions. Thereby accept the appointment as registered agent and acceptance of decicions. Thereby accept the appointment as registered agent and acceptance of decicions. Thereby accept the appointment as registered agent and acceptance of decicions. The acceptance of decicions. Thereby accept the appointment are registered agent and acceptance of decicions. Thereby accept the appointment are registered agent and acceptance of decicions. The acceptance of decicions. The acceptance of decicions. Ther		<u> </u>	├ ─ '			· -	. ~	s. 199.032,
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Size				81	Name			
Size	HATTEN	. SIDNEY L SR			Ferger	son, Terry L.		
FLORAL CITY FL 34436 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered or 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. Lar familiar with, and accept the obligations of Section 617.0503, Florida Statutes. SIGNATURE Signature Fundament and Comparison Statutes of Florida Statutes. SIGNATURE Signature Fundament and Statutes of Florida Statutes of Florida Statutes of Florida Statutes of Florida Statutes. SIGNATURE Signature Fundament and Statutes of Florida Statu			83 Street Add 8380 !		ess (P.O. Box Number is Not Acceptable	1}		
Section Sect				83	-300 D	· cove 11.		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, at familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE				0.0		City F1.		
11. Pursuant to the provisions of Sactions 617,0502 and 617,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE SIGNATURE Signature for inspiration of mostered agent and by it ask statute. OFFICERS AND DIRECTORS 13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD OFFICERS AND DIRECTORS IN 12 TO FILE IN TITLE PD OFFICERS AND DIRECTORS IN 12 TO FILE IN TITLE PD OFFICERS AND DIRECTORS IN 12 TO STATE ADDRESS STREET ADDRESS TITLE OFFICERS AND DIRECTORS IN 12 TO STATE ADDRESS TITLE OFFICERS AND DIRECTORS IN 12 TO STATE ADDRESS TITLE OFFICERS AND DIRECTORS IN 12 TO STATE ADDRESS TO STATE ADDRESS TITLE OFFICERS AND DIRECTORS IN 12 TO STATE ADDRESS TITLE OFFICERS AND DIRECTORS IN 12 TO STATE ADDRESS TO STATE A				84	City		FI 85 Z	žip Code
SIGNATURE	or register	ed agent, or both, in the State of Fione	da. Such chance was authoriz	red by the corpo	amed corpora oration's boar	ation submits this statement for the purp d of directors. I hereby accept the appoi	ose of changing its ntment as registere	registered office ed agent. I am
12.								
Title	10				signature required		DATE 2-2.	-94
NAME								
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CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further		v certify that the information supplied	with this filing is voluntarily for	6.4 CHY-ST	-ZIP	or the everyotion stated in Section 440.0	7/0)((A) Cleside Ct.	
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 und 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.	oath; that	i the information indicated on this anni. I am an officer or director of the corpo	uai report or supplemental ann oration or the receiver or truste	iual report is true e empowered to	and accurat	to and that my pignature chall have the p	ama laggi affact on	if made under

LANGE T. FUNCTIONS TERRY L. FERGERSON 1-19-94 431-0100 SIGNATURE AND TYPED OR PRINTED YAME OF SIGNING OFFICER OR DIRECTOR

Date

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