


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N94000002690</b>	
1. Entity Name <b>BISHOP CHARLES B. MCLAUGHLIN POST 1917, CATHOLIC WAR VETERANS OF THE UNITED STATES OF AMERICA, I</b>	

Principal Place of Business <b>3167 SAND TRAP COURT LAKELAND, FL 33809</b>	Mailing Address <b>3167 SAND TRAP COURT LAKELAND, FL 33810</b>
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01082004 No Chg-NP CR2E037 (10/03)

4. FEI Number <b>59-3153597</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>SMITH, SERAL A 3167 SAND TRAP COURT LAKELAND, FL 33809</b>
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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

Filing Fee is \$61.25  
Due by May 1, 2004

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be  
Added to Fees**

000000127516  
04/26/04-80001-010 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR UNSER, LOREN E. 4747 N RD 33 LAKELAND, FL 33805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR GERETY, STEPHEN P. 5011 ALDERMAN RD LAKELAND, FL 33810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR SKOKAN, OTTO 1323 LAKE BONNY DR W LAKELAND, FL 33801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, SERAL A 3167 SAND TRAP COURT LAKELAND, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:**  **SERAL A. SMITH** **4/19/04** **863-858-488V**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #