

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

**FILED**  
**Jan 26, 2006 8:00 am**  
**Secretary of State**

01-26-2006 90027 045 \*\*\*\*61.25

**DOCUMENT # N94000004764**

1. Entity Name

OCEANWAY POST NO. 11406 VETERANS OF FOREIGN  
WARS OF THE UNITED STATES, INC.



Principal Place of Business

17 PONCE BLVD N  
JACKSONVILLE FL 32218  
US

Mailing Address

P. O. BOX 28084  
JACKSONVILLE FL 32226-8084  
US

2. Principal Place of Business

3. Mailing Address

P. O. BOX 28084

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
JACKSONVILLE FL

Zip

Country

Zip  
32218

Country  
US

4. FEI Number

59-3240613

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

HOLLOWAY, WILLIAM E  
10201 W BEAVER ST., LOT 88  
JACKSONVILLE FL 32220-2177

Name RONALD C. JOHNSON

Street Address (P.O. Box Number is Not Acceptable)  
10429 PINEHURST DR

City JACKSONVILLE

FL

Zip Code  
32218

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

*Ronald C. Johnson* ADJUTANT

JAN 19, 2006

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**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME BRIDGES, JAMES B JR  
STREET ADDRESS 3652 NEW BERLIN RD  
CITY-ST-ZIP JACKSONVILLE FL 32226

TITLE D ☐ Delete  
NAME MOHLER, PHILLIP S  
STREET ADDRESS 10816 HAWAII DR S  
CITY-ST-ZIP JACKSONVILLE FL 32246

TITLE D ☐ Delete  
NAME LIKER, JAMES H  
STREET ADDRESS 11342 MCALLISTER BLVD  
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE T ☒ Delete  
NAME HOLLOWAY, WILLIAM E  
STREET ADDRESS 1020 W. BEAVER ST, LOT 88  
CITY-ST-ZIP JACKSONVILLE FL 32220-2177

TITLE T ☐ Delete  
NAME JOHNSON, RONALD C.  
STREET ADDRESS 10429 PINEHURST DR  
CITY-ST-ZIP JACKSONVILLE, FL 32218

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:** *Ronald C. Johnson* RONALD C. JOHNSON JAN 19, 2006 904-757-9887