

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000139

FILED  
Apr 09, 2012  
Secretary of State

**Entity Name:** DEPARTMENT OF FLORIDA, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

**Current Principal Place of Business:**

543 NE SANCHEZ AVE  
OCALA, FL 34470

**New Principal Place of Business:**

**Current Mailing Address:**

543 NE SANCHEZ AVE  
OCALA, FL 34470

**New Mailing Address:**

**FEI Number:** 59-0494095

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BACHAND, W. BENNY  
543 NE SANCHEZ AVE  
OCALA, FL 34470 US

**Name and Address of New Registered Agent:**

GAULT, WILLIAM J  
543 NE SANCHEZ AVE  
OCALA, FL 34470 US

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: WILLIAM J. GAULT

04/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARRIGNAN, WAYNE  
Address: 543 NE SANCHEZ AVE  
City-St-Zip: Ocala, FL 34470 US

Title: STD  
Name: GAULT, WILLIAM J  
Address: 543 NE SANCHEZ AVE  
City-St-Zip: Ocala, FL 34470 US

Title: D  
Name: PYATT, CHESTER  
Address: 543 NE SANCHEZ  
City-St-Zip: Ocala, FL 34470 US

Title: D  
Name: MARKHAM, T. WAYNE W  
Address: 543 NE SANCHEZ AVE  
City-St-Zip: Ocala, FL 34470 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM J. GAULT

STD

04/09/2012

Electronic Signature of Signing Officer or Director

Date