SECOND NOTICE: ... DISSOLVED ...
AMOUNT DUE ON OR BEFORE 09/30/98: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

0011616

NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 OCT 19 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000000882 (8)

1. Corporation Name
REGULAR AMERICAN VETERANS INC. NATIONAL HEADQUARTERS

Principal Place of Business	Mailing Address
3049 CRAWFORDVILLE HWY CRAWFORDVILLE FL 32326 US	P.O. BOX 1860 CRAWFORDVILLE FL 32326 US

3. Date Incorporated or Qualified: 02/16/1996
4. FEI Number: 59-3280603 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 1309 HARRISON LANE	26 1309 Harrison Lane
22 Suite, Apt. #, etc. —	27 Suite, Apt. #, etc. —
23 City & State: Austin, Texas	28 City & State: Austin Texas
24 Zip: 78742 · 25 Country: U.S.A.	29 Zip: 78742 · 30 Country: U.S.A.

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
HEARON, JOHN F 4640 COASTAL HWY CRAWFORDVILLE FL 32327	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 598240900453 — 4 84 City 08/27/98 ... 85 Zip Code *****61.25 ******78742

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 office 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. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE [signature] 7-30-98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	D Nat'l Cmdr	☒ Change ☐ Addition
NAME	HEARON, JOHN F		1.2 NAME	Philip Vela	
STREET ADDRESS	NATIONAL COMMANDER, 4640 COASTAL HWY		1.3 STREET ADDRESS	1309 Harrison Lane	
CITY-ST-ZIP	CRAWFORDVILLE FL		1.4 CITY-ST-ZIP	Austin, Texas 78742	
TITLE	VPD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	YELTON, RICHARD		2.2 NAME	Yelton, Richard	
STREET ADDRESS	201 E MONTEREY — SAME		2.3 STREET ADDRESS	201 E. Monterey	
CITY-ST-ZIP	POMONA CA		2.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	3.1 TITLE	D Nat'l Jr. Vice Cmdr	☒ Change ☐ Addition
NAME	CARTER, JERRY		3.2 NAME	Walter Arrington	
STREET ADDRESS	RT 5, BOX 765		3.3 STREET ADDRESS	3528 London Lane	
CITY-ST-ZIP	TALLAHASSEE FL		3.4 CITY-ST-ZIP	Ft. Worth, Texas 76118	
TITLE	T	☒ DELETE	4.1 TITLE	T Nat'l Adj/Qmstr	☒ Change ☐ Addition
NAME	ADAMS, VESTER E		4.2 NAME	John Engberg II	
STREET ADDRESS	RT 5, BOX 1065		4.3 STREET ADDRESS	1309 Harrison Lane	
CITY-ST-ZIP	TALLAHASSEE FL		4.4 CITY-ST-ZIP	Austin, Texas 78742	
TITLE	D	☒ DELETE	5.1 TITLE	D Nat'l Inspector General	☒ Change ☐ Addition
NAME	SMITG, MICHAEL		5.2 NAME	Jerry Carter	
STREET ADDRESS	601 EMERALD ACRES		5.3 STREET ADDRESS	Rt 5 Box 765	
CITY-ST-ZIP	CRAWFORDVILLE FL		5.4 CITY-ST-ZIP	Tallahassee, Florida 32311	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	B 10/22/98	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	DEP. $61.25	

CR2E037 (5/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 7-30-98 512-385-1181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Phillip S. Vela

REGULAR AMERICAN VETERANS
Phillip S. Vela, National Commander
1309 HARRISON LANE, AUSTIN, TX., 78742 - 2817
TEL: 1 - 800 - 981 - 8387. FAX: 1-512 - 385 - 1181
E-MAIL: regamvetns@aol.com
WWW: www.onr.com/user/rav/ravhome.htm.

OCT 15 1998

Florida Department of State.
Division of Corporation s
Annual Report Section.
PO Box 6327
Tallahassee, Florida 32314.

RE: REGULAR AMERICAN VETERANS, INC.

Dear Sir or Madam:

Enclosed are the completed forms for the purpose of registering the RAV in Florida.

The registered agent is as follows:

JOHN F. HEARON, PAST NATIONAL COMMANDER.
R. A. V. REGIONAL OFFICE.
4642 COASTAL HIGHWAY
CRAWFORDVILLE, FLA., 32327.

TEL: 1 - 850 - 926 - 8559.

I apologize for the lateness in responding to your letter of September 17, 1998.

Sincerely,

JOHN B. ENGBERG II, PNC/OCH
National Adjutant.

CC: Past National Commander Hearon.
File Copy