

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000000882

1. Entity Name

REGULAR AMERICAN VETERANS INC. NATIONAL HEADQUARTERS

FILED

Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90081 028 ****70.00

Principal Place of Business

1426 SHADEVILLE HWY
CRAWFORDVILLE FL 32327
US

Mailing Address

PO BOX 1860
CRAWFORDVILLE FL 32326
US

850-926-5387



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1426 SHADEVILLE HWY
Suite, Apt. #, etc.

3. Mailing Address

PO BOX 1860
Suite, Apt. #, etc.

City & State

CRAWFORDVILLE FL

City & State

CRAWFORDVILLE FL

4. FEI Number

59-3280603

☒ Applied For

☐ Not Applicable

Zip

Country

32327

Wakulla

Zip

32326

Country

Wakulla

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

4640
HEARON, JOHN F
4640 COASTAL HWY
CRAWFORDVILLE FL 32327

7. Name and Address of New Registered Agent

Name JOHN F HEARON NA

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

City

FL

Zip Code

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.

SIGNATURE

John F. Hearon

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DNC
NAME HEARON, JOHN F
STREET ADDRESS 4642 COASTAL HWY
CITY-ST-ZIP CRAWFORDVILLE FL 32327 ☐ Delete

TITLE DNV
NAME ARRINGTON, WALTER
STREET ADDRESS 3528 LONDON LANE
CITY-ST-ZIP FORT WORTH TX 76118 ☐ Delete

TITLE D
NAME ENGBERG, JOHN B
STREET ADDRESS 1309 HARRISON LANE
CITY-ST-ZIP AUSTIN TX 78742 ☐ Delete

TITLE D
NAME CARTER, JERRY
STREET ADDRESS 9883 WOODVILLE HWY
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

TITLE T
NAME ADAMS, VESTER
STREET ADDRESS RT 5 BOX 1065 HWY 63
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

TITLE T
NAME YELTON, RICHARD
STREET ADDRESS 272 E. MONTEREY
CITY-ST-ZIP POMONA CA 91766 ☐ Delete

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

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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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

Wakulla County Community Development Department
Planning, Zoning, FEMA/CRS/LMS & Code Enforcement
340 Trice Lane, PO Drawer 1210 Crawfordville FL
Phone (850) 926-3695 email: gem4net.netscape.net