

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-20-2004 90007 010 ****70.00

DOCUMENT # *N96000003745*

1. Entity Name
*VETERANS OF FOREIGN WARS OF THE
UNITED STATE BIG PINE KEY POST 4729*



DO NOT WRITE IN THIS SPACE

24013269

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
31140 OVERSEAS HWY

3. Mailing Address
PO BOX 43164

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Big Pine Key FL.

City & State
Big Pine Key FL.

4. FEI Number
65-0295683

Applied For
Not Applicable

Zip
33043

Country
Monroe

Zip
33043

Country
Monroe

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name *HUGHES, CHARLES L.*

Street Address (P.O. Box Number is Not Acceptable)
29508 SARATOGA ST.

City *Big Pine Key*

FL

Zip Code
33043

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 *Charles Hughes*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-18-04
DATE

**FEE IS \$61.25
Initial or Amended UBR**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
*COMMANDER
SCHERBIN, EDWARD J.
3753 GUMBO LIMBO ST.
Big Pine Key FL 33043*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*ADJUTANT
HUGHES, CHARLES L.
29508 SARATOGA ST.
Big Pine Key FL 33043*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*QUARTERMASTER
RODDA, Gerald B.
3745 GUMBO LIMBO ST.
Big Pine Key FL 33043*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
*SR. VICE COMMANDER
WALLACE, ROBERT R.
PO BOX 205
Big Pine Key, FL 33043*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Gerald B. Rodda* *Gerald B. Rodda* *2-18-04* *305-372-7301*

CR2E037B (12/02)