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NONPROFIT **CORPORATION** ANNUAL REPORT



Sandra B. Morthoni -

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9700004300 (6)

FILED Feb 17 1998 8:00am Secretary of State

KOREAN WAR VETERANS ASSO., INC. SUNCOAST CHAPTER		PTER		
Principal Place of Business	Mailing Address		T IDDUITED BED HAVE FROM TEACH A	ECHI DONA ODANI DONIN DIBDO ININ BONIN EKNI FORI
C/O V.F.W. POST 4364 5773 62ND STREET NORTH 5773 62ND STREET NORTH ST. PETERSBURG FL 33708 C/O V.F.W. POST 4364 5773 62ND STREET NOR ST. PETERSBURG FL 33708			3. Date Incorporated or Qualified 07/25/1997 4. FEI Number 59-3/9-3-28 Not Applied For Not Applicable	
Principal Place of Business	2a. Mailing Address		5. Certificate of Status Desired	CO 75 Additional
	26			Fee Required
Suite, Apt. #, etc.	Suite Apt. #, etc.	382	 Election Campaign Financin Trust Fund Contribution 	lg \$5.00 May Be ☐ Added to Fees
City & State	City & State	41	7. is this nonprofit corporation	
	28 BAY FINES	s HA.		Yes 🔀 No
Zip Country	Zip	Country	1	s paid the current year Intangible
26		30 FINE //AS	Personal Property Tax due 3 10. Name and Address of New	
9. Name and Address of Cui	rrent Registered Agent	81 Name	10. Name and Address of New	Thegistered Agent
ARCAND, JOAN M 5773 62ND AVENUE NO ST. PETERSBURG FL 33709		82 Street Add 56 74	ress (P.O. Box Number is Not Acce	BIUD
		84 City		FL 85 Zip Code 3.8 708
			War and a state of the state of	the purpose of changing its register
Pursuant to the provisions of Sections 617.	0502 and 617.1508, Florida Statute	es, the above-named corp	poration submits this statement for t	the bulbose of custishing he redictor
Pursuant to the provisions of Sections 617. office or registered agent, or both, in the Signer of Si	0502 and 617.1508, Florida Statute tate of Florida. Such change was a bligations of, Section 617.0503, Flo	es, the above-named corporation of the corporation	poration submits this statement for t ition's board of directors. I hereby a	ccept the appointment as registered
	cand son	an M. HRC.	AND	ccept the appointment as registered
IGNATURE Signature typed or printed name of registered	d agent and title if applicable (NOTE	E: Registered Agent signature requi	AVD ired when releasing)	DATE
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