2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2020
Secretary of State
4324341459CC

DOCUMENT# 733300

Entity Name: WEST PUTNAM POST NO. 10164 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

1034 HWY 20
INTERLACHEN, FL 32148

Current Mailing Address:

1034 HWY 20
INTERLACHEN, FL 32148 US

FEI Number: 59-6569997

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHAGAN, THEODORE B
1034 HWY 20
INTERLACHEN, FL 32148 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: THEODORE B PHAGAN 07/21/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	COMMANDER
Name	PHAGAN, THEODORE B
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	JUDGE ADVOCATE
Name	ALLEN, WILLIAM J
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	CHAPLAIN
Name	MELTON, MICHAEL C
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	T2
Name	BLACKBURN, SEAN
Address	1034 SR 20
City-State-Zip:	INTERLACHEN FL 32148

Title	T3
Name	MASTELLER, DALE E
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148-6130

Title	SR VISE CDR, SERVICE OFFICER
Name	FREEMAN, JOHN E
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	JR. VICE CDR
Name	HOPKINS, BERRY L
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	QM, ADJUTANT
Name	HOUSE, ANTHONY R
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Continues on page 2

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: ANTHONY R HOUSE QM 07/21/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	T1
Name	PRETCHARD, JIMMY
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	T2
Name	HOPKINS, BRADLEY N
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	SURGEON
Name	SMITH, JAMES
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148