2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2013
Secretary of State
CC1680666526

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:

PIEHLER, JIMMY L
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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

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

Title	QM
Name	PIEHLER, JIMMY L
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	T1
Name	GODWIN, DEWEY C
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	SURGEON
Name	WELCH, GARY L
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	SV
Name	COMBS, RICHARD
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148-6130

Title	T2
Name	CRAWFORD, THOMAS L
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	PASTOR
Name	WHITE, CARL V
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	ADJUTANT
Name	SEMRAN, STEPHEN M
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: JIMMY L PIEHLER — QUARTER MASTER — 02/06/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	T3
Name	SMITH, BRUCE A
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148

Title	SERVICE OFFICER
Name	CROWLEY, DAN C
Address	1034 HWY 20
City-State-Zip:	INTERLACHEN FL 32148