

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750488

Entity Name: DICKINSON-TOMPKINS POST 2380 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.**FILED**
Apr 26, 2016
Secretary of State
CC7022816623**Current Principal Place of Business:**510 S ALABAMA AVE.
DELAND, FL 32724-5944**Current Mailing Address:**510 S ALABAMA AVE.
DELAND, FL 32724-5944 US**FEI Number: 23-7140046****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GOODFELLOW & CO CPA, INC
344 S WOODLAND BLVD
DELAND, FL 32720 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: PEGGY WHTIMORE****04/26/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CMDR
Name	KOCH, PATRICK
Address	510 S ALABAMA AVE.
City-State-Zip:	DELAND FL 32724-5944

Title	SR VICE
Name	STEPHEN, LANGSTON L
Address	510 S ALABAMA AVE.
City-State-Zip:	DELAND FL 32724-5944

Title	JR VICE
Name	RICHARD, CAVANAGH D
Address	510 S ALABAMA AVE.
City-State-Zip:	DELAND FL 32724-5944

Title	QUARTERMASTER
Name	WHITMORE, PEGGY A
Address	510 S ALABAMA AVE.
City-State-Zip:	DELAND FL 32724-5944

Title	JR ADVOCATE
Name	DAMON, CUTLIP
Address	510 S ALABAMA AVE.
City-State-Zip:	DELAND FL 32724-5944

Title	CHAPLAIN
Name	ROBERT, GREEN
Address	510 S ALABAMA AVE.
City-State-Zip:	DELAND FL 32724-5944

Title	JUDGE ADVOCATE
Name	STEPHEN, MAHNKEN N
Address	510 S ALABAMA AVE.
City-State-Zip:	DELAND FL 32724-5944

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: PEGGY WHITMORE**QUARTERMASTER****04/26/2016**

Electronic Signature of Signing Officer/Director Detail

Date