

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765165

Entity Name: HERNANDO BEACH, POST NO. 9236, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.**FILED**
Apr 08, 2023
Secretary of State
9373711033CC**Current Principal Place of Business:**3435 SHOAL LINE BLVD.
SPRINGHILL, FL 34607-0440**Current Mailing Address:**3435 SHOAL LINE BLVD.
SPRINGHILL, FL 34607-0440**FEI Number: 59-2224347****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SPENCER, JASON R
3435 SHOAL LINE BLVD
HERNANDO BEACH, FL 34607 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: JASON R SPENCER****04/08/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** COMMANDER
Name SPENCER, JASON R
Address 6083 WAYCROSS DRIVE
City-State-Zip: SPRING HILL FL 34606-4650**Title** QUARTERMASTER
Name WACHS, JOSEPH V.
Address 3504 CROAKER DRIVE
City-State-Zip: HERNANDO BEACH FL 34607**Title** SR VICE COMMANDER
Name AKERS, ANTHONY D
Address 10130 FEATHER RIDGE DRIVE
City-State-Zip: WEEKI WACHEE FL 34613**Title** JR VICE COMMANDER
Name FINE, THOMAS L
Address 12903 LAKE VISTA DRIVE
City-State-Zip: GIBSONTOWN FL 33534-3900**Title** CHAPLAIN
Name PETER , CIGNARELLA A
Address 15139 BROOKRIDGE BLVD
City-State-Zip: BROOKSVILLE FL 34613-5824**Title** SERVICE OFFICER
Name FEZY, JOHN S
Address 3400 PALOMETA DRIVE
City-State-Zip: HERNANDO BEACH FL 34607-3653**Title** ADJUTANT
Name SPENCER, JASON R
Address 6083 WAYCROSS DRIVE
City-State-Zip: SPRING HILL FL 34606-4650**Title** 1 YR TRUSTEE
Name DENDY, JIMMY
Address 3435 SHOAL LINE BLVD
City-State-Zip: HERNANDO BEACH FL 34607**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: JASON SPENCER**COMMANDER****04/08/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title 2 YR TRUSTEE
Name MARTIN, THOMAS E
Address 10521 MARYSVILLE STREET
City-State-Zip: SPRING HILL FL 34608-4673

Title 3 YR TRUSTEE
Name CHIVERS, DAVID W.
Address 417 BISCAYNE DRIVE
City-State-Zip: HERNANDO BEACH FL 34607-3006