

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14872

Entity Name: FORT PIERCE WESTSIDE POST NO. 8058 VETERANS OF
FOREIGN WARS OF THE UNITED STATES, INC.

FILED
Mar 04, 2024
Secretary of State
3959586004CC

Current Principal Place of Business:

VFW POST 8058
3475 DOUGLAS RD
FORT PIERCE, FL 34951

Current Mailing Address:

VFW POST 8058
PO BOX 1765
FORT PIERCE, FL 34954-1765 US

FEI Number: 59-2311743

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ARMSTRONG, CHRISTOPHER A
2399 NW PADOVA ST
PORT SAINT LUCIE, FL 34986 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: CHRISTOPHER ARMSTRONG

03/04/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title COMMANDER
Name CASTRO, FRANCIS
Address 650 SW LITTLE TALBOT CT.
City-State-Zip: PORT SAINT LUCIE FL 34986

Title QUARTERMASTER/ADJUTANT
Name ARMSTRONG, CHRISTOPHER A
Address 2399 NW PADOVA ST.
City-State-Zip: PORT SAINT LUCIE FL 34986

Title 1ST YEAR TRUSTEE
Name TIMBERLAKE, SEAN
Address 2135 19TH AVE SW
City-State-Zip: VERO BEACH FL 32962

Title 2ND YEAR TRUSTEE
Name BERGSTROM, JAY
Address 1924 SW AARON LN
City-State-Zip: PORT SAINT LUCIE FL 34953

Title 3RD YEAR TRUSTEE
Name GREENING, JAMIE
Address 519 CROOKED LAKE LN
City-State-Zip: FORT PIERCE FL 34982

Title SERVICE OFFICER
Name STAMPS, RONALD C
Address 1009 S 7TH ST
City-State-Zip: FORT PIERCE FL 34950

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: CHRISTOPHER ARMSTRONG

QUARTERMASTER/ADJUTANT 03/04/2024

Electronic Signature of Signing Officer/Director Detail

Date