

FILE FEE: FLDS FEE AFTER MAY 1 IS \$100.00

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS**

**APPROVED
AND
FILED**

**95 MAY 11 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 731123 (6)
1. Corporation Name
**UPPER KEYS POST #10211 VETERANS OF FOREIGN WARS
OF THE UNITED STATES, INC.**

Principal Place of Business Mailing Address
P.O. BOX 1109 KEY LARGO FL 33037 **P.O. BOX 1109 KEY LARGO FL 33037**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 26
22 Suite, Apt # etc 27 Suite, Apt #, etc
23 City & State 28 City & State
24 Zip 25 Country 29 Zip 30 Country

3. Date Incorporated or Qualified **11/15/1974** 3a. Date of Last Report **07/08/1994**
4. FEI Number **23-7277248** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LAROSE, WILLIAM H
342 RYAN AVE.
KEY LARGO FL 33037**

81 Name **LASKIS ALEX P.**
82 Street Address (P.O. Box Number is Not Acceptable) **3 BOWEN DR.**
83
84 City **KEY LARGO** FL 85 Zip Code **33037**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Alex P. Laskis*

5/3/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME LASKIS, ALEX P
STREET ADDRESS 3 BOWEN DR.
CITY ST ZIP KEY LARGO FL

TITLE STD
NAME LAROSE, WILLIAM H
STREET ADDRESS 342 RYAN AVE.
CITY ST ZIP KEY LARGO FL

TITLE VD
NAME BUNTON, CHARLES
STREET ADDRESS 8 A CANDY PLACE
CITY ST ZIP KEY LARGO FL

TITLE D
NAME WENTZ, CARL W
STREET ADDRESS 85 BONE FISH AVE.
CITY ST ZIP KEY LARGO FL

11 TITLE PD Change Addition
12 NAME CASTILLO ALFRED
13 STREET ADDRESS 8 GULFSTREAM DR.
14 CITY ST ZIP KEY LARGO, FL. 33037

21 TITLE STD Change Addition
22 NAME LASKIS ALEX P.
23 STREET ADDRESS 3 BOWEN DR.
24 CITY ST ZIP KEY LARGO, FL. 33037

31 TITLE VD Change Addition
32 NAME MARTON RICHARD
33 STREET ADDRESS 4 DOLPHIN RD.
34 CITY ST ZIP KEY LARGO, FL. 33037

41 TITLE D Change Addition
42 NAME WARDWARD LOUIS
43 STREET ADDRESS 103 W. AVE A
44 CITY ST ZIP KEY LARGO, FL. 33037

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Alex P. Laskis* **ALEX P. LASKIS** **5/3/95** **305-451-0485**