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Feb 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. [Signature]
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 749646 (6)
1. Corporation Name
ELLENTON V.F.W. NO. 9226, VETERANS OF FOREIGN WA
RS OF THE UNITED STATES, INC.



Principal Place of Business: 3511 12TH ST., E. ELLENTON FL 34222
Mailing Address: 3511 12TH ST., E. ELLENTON FL 34222-2101

3. Date Incorporated or Qualified: 11/02/1979
3a. Date of Last Report: 04/15/1996
4. FEI Number: 59-1936299
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: HARRINGTON, RICHARD, 107 49TH STREET EAST, PALMETTO FL 34221
10. Name and Address of New Registered Agent: [Blank]

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: [Signature] (NOTE: Registered Agent signature required when reinstating) DATE: [Blank]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: C	NAME: PAWUL, DWIGHT W	1.1 TITLE: Commander	C <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 3511 12TH ST. E	CITY-ST-ZIP: ELLENTON FL 34222	1.2 NAME: Rich Harrington	
		1.3 STREET ADDRESS: 3511 12th ST E	
		1.4 CITY-ST-ZIP: Ellementon FL 34222	
TITLE: D	NAME: PARDONE, JOHN	2.1 TITLE: Sr vice Commander	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 3511 12TH ST. E	CITY-ST-ZIP: ELLENTON FL 34222	2.2 NAME: charlie Carrell	
		2.3 STREET ADDRESS: 3511 12th st E	
		2.4 CITY-ST-ZIP: Ellementon FL 34222	
TITLE: D	NAME: LIDON, JOHN	3.1 TITLE: Jr vice commander	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 3511 12TH ST. E	CITY-ST-ZIP: ELLENTON FL 34211	3.2 NAME: John Pardon	
		3.3 STREET ADDRESS: 3511 12th st E	
		3.4 CITY-ST-ZIP: Ellementon FL 34222	
TITLE: D	NAME: MCKEE, CLIFFORD	4.1 TITLE: Trustee	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 3511 12TH ST EAST	CITY-ST-ZIP: ELLENTON FL	4.2 NAME: J. Goergen	
		4.3 STREET ADDRESS: 3511 12th st E	
		4.4 CITY-ST-ZIP: Ellementon FL 34222	
TITLE: T	NAME: DAVIS, WILLIAM K	5.1 TITLE: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 3511 12TH ST EAST	CITY-ST-ZIP: ELLENTON FL	5.2 NAME: [Blank]	
		5.3 STREET ADDRESS: [Blank]	
		5.4 CITY-ST-ZIP: [Blank]	
TITLE: [Blank]	NAME: [Blank]	6.1 TITLE: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: [Blank]	CITY-ST-ZIP: [Blank]	6.2 NAME: [Blank]	
		6.3 STREET ADDRESS: [Blank]	
		6.4 CITY-ST-ZIP: [Blank]	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: [Signature] 1-27-97 728-8535
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE # 0062332

CR2E037 (9/96)