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**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90043 005 \*\*\*\*61.25

NONPROFIT  
 CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 752056**

1. Corporation Name

**LAKE PANASOFFKEE POST NO 10084 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.**

527937 - 90043 - 3

Principal Place of Business

HWY 470 & C.R. 439  
 P O BOX 391  
 LAKE PANASOFFKEE FL 33538

Mailing Address

HWY 470 & C.R. 439  
 P O BOX 391  
 LAKE PANASOFFKEE FL 33538



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

04/16/1980

22 City & State

27 City & State

4. FEI Number  
 23-7403193

Applied For  
 Not Applicable

23 Zip Country

28 Zip Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24

25

29

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6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ANTLEY, WILLIAM J**  
 2027 CR 470  
 LAKE PANASOFFKEE FL 33538

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  DELETE  
 NAME ANTLEY, WILLIAM J  
 STREET ADDRESS 2027 CR 470  
 CITY-ST-ZIP LAKE PANASOFFKEE FL 33538

1.1 TITLE P  Change  Addition  
 1.2 NAME DAVIS, BOBBY  
 1.3 STREET ADDRESS 1021 CR 439  
 1.4 CITY-ST-ZIP LAKE PANASOFFKEE, FL 33538

TITLE VP  DELETE  
 NAME ROBERTS, JAMES  
 STREET ADDRESS 11136 N.W. 15 STRET  
 CITY-ST-ZIP WILDWOOD FL 34785

2.1 TITLE VP  Change  Addition  
 2.2 NAME ANTLEY, WILLIAM J.  
 2.3 STREET ADDRESS 2027 CR 470  
 2.4 CITY-ST-ZIP LAKE PANASOFFKEE, FL 33538

TITLE ST  DELETE  
 NAME DUNCAN, JAMES  
 STREET ADDRESS CR 766 - 485A  
 CITY-ST-ZIP LAKE PANASOFFKEE FL 33538

3.1 TITLE ST  Change  Addition  
 3.2 NAME COLEMAN, FREDERICK  
 3.3 STREET ADDRESS 1766 CR 543B  
 3.4 CITY-ST-ZIP SUMTERVILLE, FL 33585

TITLE D  DELETE  
 NAME MCCANN, DAVE  
 STREET ADDRESS 4647 N.W. 45TH LANE  
 CITY-ST-ZIP LAKE PANASOFFKEE FL 33538

4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

TITLE D  DELETE  
 NAME COWLES, ROSS C.  
 STREET ADDRESS 1557 CR 434 A  
 CITY-ST-ZIP LAKE PANASOFFKEE FL

5.1 TITLE D  Change  Addition  
 5.2 NAME CRIST, JOSEPH A. JR  
 5.3 STREET ADDRESS 4725 E. SHOREWOOD DR.  
 5.4 CITY-ST-ZIP HERNANDO, FL 34442

TITLE D  DELETE  
 NAME DUPONT, ARMAND G. III  
 STREET ADDRESS POST OFFICE BOX 981  
 CITY-ST-ZIP BUSHNELL FL

6.1 TITLE D  Change  Addition  
 6.2 NAME ROBERTS, JAMES  
 6.3 STREET ADDRESS 11136 N.W. 15 ST.  
 6.4 CITY-ST-ZIP WILDWOOD, FL 34785

14. I 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, with all other like empowered.

SIGNATURE: *William J. Antley* ANTLEY APRIL 26, 1999 352-793-2054

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

0085825