2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 706444



FILED Feb 26, 2003 8:00 am § Secretary of State

ROBERT EIGN W	T LEAK AGEE, POST NO. 1966 ARS OF THE UNITED STATES,	, veterans of foi	R		2-26-2003 90145 02	0 ****7(0.00
Principal Place of Business 350 SW 25TH STREET FORT LAUDERDALE FL 33315 2. Principal Place of Business		Mailing Address 350 SW 25TH STREET FORT LAUDERDALE FL 33	1315				
		3. Mailing Address					
Suite, Ap	pt. #, etc.	Suite, Apt. #, etc.			HECK HERE IF MAKING	CHANGES	3
City & S	itate	City & State		4. FEI Number 59	-1006189	A	pplied For
Zip	Country	Zip	Country	5. Certificate of Sta	itus Desired	8.75 Ad	ot Applicable Iditional
FORT L	6. Name and Address of Current F R PASSUALE - Hars 174 A W 18 STILLIO 900 AW. AUDERDALE FL 33315-1962	Registered Agent Haritis 2926 St. April	Name Address A	ESS (P.O. Box Number is No	ess of New Registered A		90
<u></u>	ve named entity submits this statement for		City	lander da/	FL	Zip Cod	ie
SIGNATURE	Signature, typed or prior d name of registered agent ar	farrie			2-21-03		
¥	FILE NOW: FEE IS \$61.25		E: Registered Agent signature re- mpaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Florida Departr		
10.	FILE NOW: FEE IS \$61.25 OFFICERS AND DIRE	9. Election Car Trust Fund C	npaign Financing	\$5.00 May Be Added to Fees	Make Check Florida Departr	nent of S	State
10. Title NAME Street Address City-St-zip	OFFICERS AND DIRE C MCCARRON, GEORGE JR 4311 S. W. 11TH STREET PLANTATION FL 33317-4519	9. Election Car Trust Fund C	npaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Florida Departr	nent of S	State
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE C MCCARRON, GEORGE JR 4311 S. W. 11TH STREET PLANTATION FL 33317-4519 SVD LATOURRETTE, JAMES 1416 SW 15 TERRACE FORT LAUDERDALE FL 33312-3312	9. Election Car Trust Fund C	npaign Financing Contribution.	\$5.00 May Be Added to Fees	Make Check Florida Departr	nent of \$ ECTORS IN Change	State
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

9.54 7651791