FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 9:46

DOCUMENT # 732317 (3)

1. Corporation Name

PALMA SOLA POST NO. 10141 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
420 67TH STREET. W. BRADENTON FL 34209	420 67TH STREET. W. BRADENTON FL 34209

3. Date Incorporated or Qualified: 04/01/1975
3a. Date of Last Report: 01/20/1994
4. FEI Number: 59-6552199 ☐ 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

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

9. Name and Address of Current Registered Agent

CRABTREE, DOUGLAS W.
420 67TH ST W
BRADENTON FL 34209

Albert Melhus

10. Name and Address of New Registered Agent

81 Name: Melhus, Albert M.
82 Street Address (P.O. Box Number is Not Acceptable): 420 67th Street W.
83
84 City: BRADENTON **FL** 85 Zip Code: 34209

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: X Albert Melhus — 2/01/95
(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	Q	1.1 TITLE	Q	☒ Change ☐ Addition
NAME	CRABTREE, DOUGLAS W	1.2 NAME	Melhus, Albert M.	
STREET ADDRESS	420 67TH ST W	1.3 STREET ADDRESS	420 67th Street W.	
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	Bradenton, Fl 34209	
TITLE	CD	2.1 TITLE	CD	☒ Change ☐ Addition
NAME	COLLINS, CHARLES	2.2 NAME	Radenheimer, Richard	
STREET ADDRESS	7809 43RD AVE DR W	2.3 STREET ADDRESS	4515 26th St. W.	
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	Bradenton, Fl 34205	
TITLE	VD	3.1 TITLE	VD	☐ Change ☐ Addition
NAME	GLEASON, WILLIAM	3.2 NAME	Gleason, William	
STREET ADDRESS	7206 8TH AVE N.W.	3.3 STREET ADDRESS	7206 8th Ave. N. W.	
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	Bradenton, Fl	
TITLE	VD	4.1 TITLE		☒ Change ☐ Addition
NAME	ZAFFINA, JOHN	4.2 NAME	McGovern, Terrance	
STREET ADDRESS	8107 43RD AVE, NW	4.3 STREET ADDRESS	420 67th St. W.	
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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)(k), 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: Albert Melhus — 2/1/95 — 813-794-6294
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0017644