

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **733870** (0)
1. Corporation Name

TOMMY G. FOSTER - POST NO. 4590, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.



Principal Place of Business: **3709 E. ST. RD 92 PLANT CITY FL 33566 US**
Mailing Address: **VFW POST 4590 THOMAS G. FOSTER POST OFFICE BOX 1557 PLANT CITY FL 33514 US**

3. Date Incorporated or Qualified: **09/19/1975**
3a. Date of Last Report: **04/13/1995**

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

4. FEI Number: **59-6209820** 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**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: **NEWKIRK, HARRY D. 1408 NORTH WHEELER STREET 101 N. THOMAS ST. PLANT CITY FL 33566**
10. Name and Address of New Registered Agent: **ENGSTROM, ED 257 TAIHO LANE VALRICO, FL 33594**

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: *Ed Engstrom* **ED ENGSTROM** DATE: **1/22/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: S	NAME: PAQUE, JAMES E	1.1 TITLE: P	NAME: JOHNSON, JACK
STREET ADDRESS: 1111 PARK RD.	CITY-ST-ZIP: PLANT CITY FL	1.2 NAME: JOHNSON, JACK	1.3 STREET ADDRESS: 1101 N. CLARK ST.
TITLE: P	NAME: BENNETT, GEORGE F.	1.4 CITY-ST-ZIP: PLANT CITY, FL 33566	2.1 TITLE: V
STREET ADDRESS: 2265 BENNETT ROAD	CITY-ST-ZIP: PLANT CITY FL	2.2 NAME: GREGORY, MERRITT H.	2.3 STREET ADDRESS: 203 EUNICE AV.
TITLE: T	NAME: NEWKIRK, HARRY D	2.4 CITY-ST-ZIP: PLANT CITY, FL 33567	3.1 TITLE: S/T
STREET ADDRESS: 1506 E. MIMOSA DR.	CITY-ST-ZIP: PLANT CITY FL	3.2 NAME: ED ENGSTROM	3.3 STREET ADDRESS: 257 TAIHO LANE
TITLE: D	NAME: ROBINSON, RALPH	3.4 CITY-ST-ZIP: VALRICO, FL 33594	4.1 TITLE: T
STREET ADDRESS: 108 W. CASON STREET	CITY-ST-ZIP: PLANT CITY FL	4.2 NAME: KRAWCZYK, NORBERT	4.3 STREET ADDRESS: 491 CHICAGO CT.
TITLE: D	NAME: OLSON, ROY E	4.4 CITY-ST-ZIP: PLANT CITY, FL 33565	5.1 TITLE: T
STREET ADDRESS: 4224 N. WILDER RD.	CITY-ST-ZIP: PLANT CITY FL	5.2 NAME: ROBINSON, RALPH	5.3 STREET ADDRESS: 108 W. CASON ST.
TITLE: D	NAME: GREGORY, MERRIT	5.4 CITY-ST-ZIP: PLANT CITY, FL 33566	6.1 TITLE: T
STREET ADDRESS: 203 CUNICE AVE	CITY-ST-ZIP: PLANT CITY FL 33567	6.2 NAME: GREGORY, CHARLTON	6.3 STREET ADDRESS: 203 EUNICE AV.
		6.4 CITY-ST-ZIP: PLANT CITY, FL 33567	

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: *Jack Johnson* **JACK JOHNSON** DATE: **1/22/96** (813) 754-7880

CR2E037 (12/95)