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Jan 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 763001 (5)

1. Corporation Name
DONALD A. ROSS POST NO. 9610 VETERANS OF FOREIGN
GN WARS OF THE UNITED STATES, INC.



Principal Place of Business Mailing Address
354 TENTH STREET LAKE PARK FL 33403
354 TENTH STREET LAKE PARK FL 33403-3152

3. Date Incorporated or Qualified 04/27/1982
3a. Date of Last Report 01/25/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number NOT APPLICABLE
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. Applied For Not Applicable
22 City & State 27 City & State 5. Certificate of Status Desired \$8.75 Additional Fee Required
23 Zip Country 28 Zip Country 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
24 25 29 30 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
BALDWIN, GEORGE W 330 U.S. HWY 1 LAKE PARK FL 33403
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 PD NATOLI, ALBERT D 14688 92ND COURT N. WEST PALM BEACH FL
NAME 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
STREET ADDRESS 14688 92ND COURT N. WEST PALM BEACH FL
CITY-ST-ZIP WEST PALM BEACH FL
TITLE VD DIETCH, ROBERT F 25 S. FOUR SEASONS PALM BEACH GARDENS FL
NAME 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
STREET ADDRESS 25 S. FOUR SEASONS PALM BEACH GARDENS FL
CITY-ST-ZIP PALM BEACH GARDENS FL
TITLE SD MEARES, DONALD 382 LIGHTHOUSE DRIVE PALM BCH GARDENS FL
NAME 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
STREET ADDRESS 382 LIGHTHOUSE DRIVE PALM BCH GARDENS FL
CITY-ST-ZIP PALM BCH GARDENS FL
TITLE SD HOWARD, ROBERT W 925 EUCALYPTUS, RD. NORTH PALM BEACH FL
NAME 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
STREET ADDRESS 925 EUCALYPTUS, RD. NORTH PALM BEACH FL
CITY-ST-ZIP NORTH PALM BEACH FL
TITLE DELETED 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
NAME 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
STREET ADDRESS CITY-ST-ZIP
TITLE DELETED 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
NAME 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
STREET ADDRESS CITY-ST-ZIP

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] 1-12-97 (561) 842-9110
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0039910

CR2E037 (9/96)