2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2011
Secretary of State

DOCUMENT# 763315

Entity Name: LABELLE POST 10100 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

20 VETERANS WAY
LA BELLE, FL 33935 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1751
LABELLE, FL 33975 US

New Mailing Address:

FEI Number: 59-2593942 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHOENWALD, MARK C TREAS.
1355 N RIVER RD.
LABELLE, FL 33935 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CDR
Name: MIDDLETON, ROBERT P
Address: P.O. BOX 2069
City-St-Zip: LABELLE, FL 33975

Title: SR V
Name: WILHELM, CHARLES
Address: 2033 MONTANA CIRCLE
City-St-Zip: LABELLE, FL 33935

Title: JR V
Name: HANSEN, JAMES
Address: 485 CASE RD
City-St-Zip: LABELLE, FL 33935

Title: T
Name: FRANCO, ROY
Address: P.O. BOX 1228
City-St-Zip: LABELLE, FL 33975

Title: T
Name: WEGSHEID, STANLEY
Address: 2004 CRESCENT AVE
City-St-Zip: LABELLE, FL 33935

Title: T
Name: RYMAN, WILLIAM
Address: 900 AQUA ISLES M25
City-St-Zip: LABELLE, FL 33935

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARK C. SCHOENWALD TREA 01/14/2011

Electronic Signature of Signing Officer or Director Date