

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90254 049 ****61.25

DOCUMENT # 763839

1. Entity Name

SANFORD POST NO. 10108 VETERANS OF FOREIGN WARS

Principal Place of Business

Mailing Address

2644 SOL SANDORD AVE.
P.O. BOX 1081
SANFORD FL 32773
US

P. O. OX 1081
P.O. BOX 1081
SANFORD FL 32772-1081
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2644 So. SANFORD AVE

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3205586

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GILMORE, DENNIS S
403 WILLOW AVE
SANFORD FL 32771

Name **PROKOSCH, JOHN W.**

Street Address (P.O. Box Number is Not Acceptable)

172 WOOD RIDGE TRAIL

City **SANFORD**

FL

Zip Code **32771-8841**

8. 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

John W. Prokosch

JOHN W. PROKOSCH

1-16-01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MELI, CHARLES S
STREET ADDRESS 2507 YALE AVE
CITY-ST-ZIP SANFORD FL 32773 ☒ Delete

TITLE PD
NAME GILMORE, DENNIS J
STREET ADDRESS 403 WILLOW AVE.
CITY-ST-ZIP SANFORD, FL. 32771 ☒ Change ☐ Addition

TITLE VD
NAME ILSE, JAMES T
STREET ADDRESS 42200 CHERRY AVE
CITY-ST-ZIP DELAND FL 32720 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME GILMORE, DENNIS J
STREET ADDRESS 408 WILLOW AVE.
CITY-ST-ZIP SANFORD FL 32771 ☒ Delete

TITLE T.D.
NAME SCOTT, HAROLD
STREET ADDRESS 67 MARTA RD.
CITY-ST-ZIP DEBBAY, FL. 32713 ☒ Change ☐ Addition

TITLE SD
NAME PROKOSCH, JOHN W
STREET ADDRESS 172 WOOD RIDGE TRAIL
CITY-ST-ZIP SANFORD FL 32771-8841 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I 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 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:

John W. Prokosch
JOHN W. PROKOSCH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)