# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Feb 21, 2003 8:00 am**
**Secretary of State**
01-30-2003 90150 014 ****61.25

1/

DOCUMENT # 763839

1. Entity Name

SANFORD POST NO. 10108 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 2644 ~~SANFORD~~ SANFORD AVE.<br>P.O. BOX 1081<br>SANFORD FL 32773<br>US | ~~P.O. BOX 1081~~<br>P.O. BOX 1081<br>SANFORD FL 32772-1081<br>US |

CHECK HERE IF MAKING CHANGES

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| SAME | SAME |
| Suite, Apt. #, etc.: 2644 S. SANFORD AVE | Suite, Apt. #, etc. |
| City & State: SANFORD FL | City & State |
| Zip: 32773 Country: USA | 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 |
|---|---|
| ~~BIGHER, CARL~~<br>~~2401 WILLOW AVE.~~<br>~~SANFORD FL 32771~~<br>203 COLONIAL WAY<br>SANFORD FL 32771 | Name: CORNELIUS F. SAMPSON<br>Street Address (P.O. Box Number is Not Acceptable): 203 COLONIAL WAY<br>City: SANFORD FL Zip Code: 32771 |

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: CORNELIUS F. SAMPSON Cornelius F Sampson
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 Florida Department of State**

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>MELI, CHARLES S<br>2507 YALE AVE<br>SANFORD FL 32773 | ☒ Delete | HARROLD SCOTT<br>17 MARTA DR. JR. VICE COMMANDER<br>DELAND FL 32720 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD SENIOR VICE COMMANDER<br>ILSE, JAMES T<br>42200 CHERRY AVE<br>DELAND FL 32720 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>GILMORE, DENNIS J<br>408 WILLOW AVE.<br>SANFORD FL 32771 | ☒ Delete | WILLIAM LOU HOUSE<br>647 N DIVISION<br>OVIEDO FL 32765<br>COMMANDER | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>BIGHER, CARL<br>2401 WILLOW AVE.<br>SANFORD FL 32771 | ☒ Delete | CORNELIUS F. SAMPSON<br>203 COLONIAL WAY QUARTERMASTER<br>SANFORD FL 32771 | ☒ Change ☐ Addition |
| TITLE T / NAME / STREET ADDRESS / CITY-ST-ZIP | 1 YEAR TRUSTEE T<br>CARLOS RAINES<br>511 MAGNOLIA AVE<br>SANFORD, FL 32771 | ☐ Delete | 3 YEAR TRUSTEE T<br>JOHN W PROKOSCH<br>172 WOOD RIDGE TRAIL<br>SANFORD FL 32771-8841 | ☐ Change ☐ Addition |
| TITLE T / NAME / STREET ADDRESS / CITY-ST-ZIP | 2 YEAR TRUSTEE T<br>JAMES T BROWN<br>2010 ADAMS AVE.<br>SANFORD, FLORIDA 32771-4613 | ☐ Delete | | ☐ Change ☐ Addition |

CR2E037 (10/02)

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:** Cornelius F Sampson CORNELIUS F. SAMPSON 14 JAN. 03 (407) 330 4445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #