

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90043 041 ****70.00

DOCUMENT # N00000005928 1. Entity Name DISTRICT 21 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.			
Principal Place of Business 1408 ARROWHEAD CIR. CLEARWATER, FL 33759 US		Mailing Address 1408 ARROWHEAD CIR. CLEARWATER, FL 33759 US	
2. Principal Place of Business 7314 Lincoln Park Lane Suite, Apt. #, etc.		3. Mailing Address 7314 Lincoln Park Lane Suite, Apt. #, etc.	
City & State Port Richey FL Zip 34668 Country US		City & State Port Richey FL Zip 34668 Country US	
4. FEI Number 59-3737498		Applied For Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent TAMBURRO, LOUIS 1408 ARROWHEAD CIR. CLEARWATER, FL 33759		7. Name and Address of New Registered Agent Name Edward S. Valenjevick Street Address (P.O. Box Number is Not Acceptable) 7314 Lincoln Park Lane City Port Richey FL Zip Code 34668	
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 <u>Edward S. Valenjevick, Adjutant Edward S. Valenjevick</u> 1-20-04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2004		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			
TITLE	V	☐ Delete	
NAME	CLAGALA, ISADOR		
STREET ADDRESS	18724 FLORATION DRIVE		
CITY-ST-ZIP	BROOKSVILLE, FL 346101308		
TITLE	D	☒ Delete	
NAME	KOULAN, THOMAS		
STREET ADDRESS	2020 CARSON AVE		
CITY-ST-ZIP	SPRING HILL, FL 34608		
TITLE	T	☐ Delete	
NAME	FOGARTY, JOHN F		
STREET ADDRESS	PO BOX 3201		
CITY-ST-ZIP	SPRING HILL, FL 346113201		
TITLE	P	☒ Delete	
NAME	TAMBURRO, LOUIS		
STREET ADDRESS	3177B CHARTER CLUB DR		
CITY-ST-ZIP	TARPON SPRINGS, FL 34689		
TITLE	D	☒ Delete	
NAME	THEODORE, HAROING		
STREET ADDRESS	1924 WHISPERING WAY		
CITY-ST-ZIP	TARPON SPRINGS, FL 34689		
TITLE		☐ Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	P	☐ Change ☒ Addition	
NAME	William Riggs		
STREET ADDRESS	5132 Botany Drive		
CITY-ST-ZIP	Holiday FL 34690		
TITLE		☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	S	☐ Change ☒ Addition	
NAME	Edward S. Valenjevick		
STREET ADDRESS	7314 Lincoln Park Lane		
CITY-ST-ZIP	Port Richey FL 34668		
TITLE	D	☐ Change ☒ Addition	
NAME	Frank Valiko		
STREET ADDRESS	7724 Redcliff Dr.		
CITY-ST-ZIP	Port Richey FL 34668		
TITLE	D	☐ Change ☐ Addition	
NAME	Louis Tamburro		
STREET ADDRESS	1408 Arrowhead Circle		
CITY-ST-ZIP	Clearwater FL 33759		
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: <u>Edward S. Valenjevick</u> 1-20-04 727-845-4583 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			