2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 21, 2008 8:00 am

DOCUMENT # N0000005928 1. Entity Name DISTRICT 21 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.						02-21-2008	•		
Principal Place of Business Mailing Address 7314 LINCOLN PARK LANE 7314 LINCOLN PARK LANE PORT RICHEY, FL 34668 US PORT RICHEY, FL 34668 US									
2. Principal Place of Business - No P.O. Box # 1562 TEFFCIRDS ST Suite, Apt. #, etc.		3. Mailing Address 1562 J6FFURDS ST Suite, Apt. #, etc.		r	i i ur ikii ek		2011 2011 04101		
City & Stat		City & State			02042008	Chg-NP	CR2E0	37 (12/06)	-aliad Car
CLEAR	WATER FLURIDA	CLEARWATER	FL		4. FEI Number 59-373	7498		N	oplied For of Applicable
Zip 337	SG Country USA		Country		5. Certificate	of Status Desire	d 🗆	\$8.75 Add Fee Require	ditionai id
	6. Name and Address of Current I	Registered Agent	Nome		7. Name and	Address of New	w Registered	Agent	
VALENJEVICK, EDWARD S					N A : ROMAN P.O. Box Number is Not Acceptable)				
7314 LINCOLN PARK LANE PORT RICHEY, FL 34668 Street Addre					EFFOR	S ST.			
-			City	c-1 2.	1-1-2-72			Zip Cod	e
City こと へん 8. The above named entity submits this statement for the purpose of changing its registered office or register						h in the State of	FL Elorida Lam	- 33	756
the obligat	ions of registered agent.	the purpose of changing its reg	Jistered Office Of	registered	agent, or bot	n, in the State of	rionua. Tam	ianimian with,	and accept
SIGNATURE Way Glaman ALAN A. ROWAN 2-4-08									
SIGNATURE .	Signature, typed or printed name of registered agent a								
	organical system of printed rating or registrated against	nu ma ir applicable. (NOTE: He	gistered Agent signatu	ne redrated wu	en reinstating)		DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campa Trust Fund Cont	aign Financing	\$	5.00 May Bodded to Fees			k payable t	
10.	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIR	9. Election Campa Trust Fund Cont	aign Financing tribution.	□ \$	5.00 May Bodded to Fees		Make chec lorida Depa	RECTORS IN	tate
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indicated on this report or supplies with this initing coes not quality for the exemptions contained in Chapter 119, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR