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May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01781 (6)

1. Corporation Name

LEISUREVILLE POST NO. 10150 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Principal Place of Business	Mailing Address
P O BOX 833 BOYNTON BEACH FL 33425-0833	P O BOX 833 BOYNTON BEACH FL 33425-0833

3. Date Incorporated or Qualified: 03/05/1984
3a. Date of Last Report: 01/29/1996

2. Principal Place of Business
21 LEISUREVILLE
22 Suite, Apt. #, etc. BOYNTON BEACH
23 City & State FL.
24 Zip 33426 25 Country PALM Beach

2a. Mailing Address
26 P.O. BOX 833
27 Suite, Apt. #, etc. SEACREST BLVD.
28 City & State BOYNTON Beach, FL.
29 Zip 33425 30 Country PALM Beach

4. FEI Number: 59-1602695 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

DEMIK, WILLIAM J
500 SW 20TH ST
BOYNTON BCH FL 33426

10. Name and Address of New Registered Agent

81 Name Robert Zimmermann
82 Street Address (P.O. Box Number is Not Acceptable) 811 S.W. 18th Ct.
83
84 City BOYNTON Beach, FL 85 Zip Code 33426

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Robert Zimmerman 4/3/97
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☑ DELETE	1.1 TITLE	T	[redacted] TRUSTEE ☑ Change ☐ Addition
NAME	CORYER, BERNARD		1.2 NAME		VINCENT LAZIO
STREET ADDRESS	1813 SW CONGRESS BLVD		1.3 STREET ADDRESS		2433 S.W. 15th Street
CITY-ST-ZIP	BOYTON BCH FL		1.4 CITY-ST-ZIP		BOYNTON BEACH, FL. 33426
TITLE	TD	☑ DELETE	2.1 TITLE		☑ Change ☐ Addition
NAME	ENEY, RAYMOND		2.2 NAME		[redacted]
STREET ADDRESS	1102 SIESTA AVENUE		2.3 STREET ADDRESS		[redacted]
CITY-ST-ZIP	BOYNTON BEACH FL		2.4 CITY-ST-ZIP		[redacted]
TITLE	VD COMMANDER	☐ DELETE	3.1 TITLE	T	TRUSTEE ☑ Change ☐ Addition
NAME	ZIMMERMANN, ROBERT		3.2 NAME		HAROLD D. MARTINELLI
STREET ADDRESS	811 SW 18TH CT		3.3 STREET ADDRESS		1507 S.W. 21 Street
CITY-ST-ZIP	BOYNTON BCH FL		3.4 CITY-ST-ZIP		BOYNTON BEACH, FL. 33426
TITLE	S	☑ DELETE	4.1 TITLE	T	☑ Change ☐ Addition
NAME	TAORMINA, PETER		4.2 NAME		CARL JOSEPHSON
STREET ADDRESS	1011 S.W. 16TH ST.		4.3 STREET ADDRESS		119 N.W. 10 COURT
CITY-ST-ZIP	BOYNTON BEACH FL		4.4 CITY-ST-ZIP		BOYNTON BEACH, FL. 33426
TITLE	[redacted]	☐ DELETE	5.1 TITLE		TRUSTEE ☐ Change ☐ Addition
NAME	[redacted]		5.2 NAME		
STREET ADDRESS	[redacted]		5.3 STREET ADDRESS		
CITY-ST-ZIP	[redacted]		5.4 CITY-ST-ZIP		
TITLE	[redacted]	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

561-736- Robert Zimmermann