

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 02, 2002 8:00 am
Secretary of State

05-29-2002 93597 034 ****61.25

DOCUMENT # **NO17-81**

1. Entity Name
**LEISUREVILLE-POST NO-10150-
VETERANS OF FOREIGNS WARS OF THE
UNITED STATES, INC.**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
BOYNTON BEACH

3. Mailing Address
P.O. Box 833

Suite, Apt. #, etc.
P.O. Box 833

Suite, Apt. #, etc.

City & State
BOYNTON BEACH FL

City & State
BOYNTON BEACH FL

FBI Number
59-1602695

Applied For
Not Applicable

Zip
33426

Country
PALM

Zip
33426

Country
PALM

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

7. Name and Address of Current Registered Agent

Name
Robert Zimmermann

Street Address (P.O. Box Number is Not Acceptable)
811 S.W. 18 COURT

City
BOYNTON BEACH FL

Zip Code
33426

**DO NOT WRITE
IN THIS SPACE**

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
Robert Zimmermann **Commander** **5/9/02**

FEE IS \$61.25
Initial or Amended UBR

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

TITLE
D
NAME
COMMANDER
STREET ADDRESS
ROBERT ZIMMERMANN
CITY-ST-ZIP
**811 S.W. 18 COURT
BOYNTON BEACH FL 33426**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
D
NAME
SENIOR VICE COMMANDER
STREET ADDRESS
JACK KARCHIN
CITY-ST-ZIP
**2398 S.W. CONGRESS BLVD
BOYNTON BEACH FL 33426**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
J
NAME
JUNIOR VICE COMMANDER
STREET ADDRESS
JACK PIERCE
CITY-ST-ZIP
**2079 S.W. TRAVENUE
BOYNTON BEACH FL 33426**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
Q
NAME
QUARTERMASTER
STREET ADDRESS
ROBERT SCHMIDT
CITY-ST-ZIP
**814 S.W. TRAVENUE
BOYNTON BEACH FL 33426**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
T
NAME
TRUSTEE
STREET ADDRESS
PETER ROMAS
CITY-ST-ZIP
**814 S.W. 18 COURT
BOYNTON BEACH FL 33426**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
T
NAME
TRUSTEE
STREET ADDRESS
MICHAEL MICALF
CITY-ST-ZIP
**2385 S.W. 13 TERRACE
BOYNTON BEACH FL 33426**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 on an attachment with an address with all other like empowerees.

SIGNATURE:
ROBERT ZIMMERMANN

5/9/02 736-7686

**Commander NEW POST 10150
BOYNTON BEACH FL
33426**

CR2E037B (12/01)

**DO NOT WRITE
IN THIS SPACE**