NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR).

#### Apr 19, 2006 8:00 am Secretary of State DOCUMENT # NO1781 1. Entity Name LEISURE VILLE POST 10150 04-19-2006 90096 042 \*\*\*\*61.25 VETERANS OF FOREIGN WARS OF THE UNITED STATES INC DO NOT WRITE IN THIS SPACE 60028631 Mailing Address CNBHOUSE 0 BOX 4785 CR2E037B (8/05) 114/Julnue 4. FELNumber Applied For TON BEACH TORIBA 59-1602695 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FEE IS \$61.25** \$5.00 May Be Trust Fund Contribution. Initial or Amended AR Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. QUARTER MASTER TITLE STUART PRESTON 2050 5-W-12 Avenue ROYHTON BEOCH FL 33426 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE RUSTE EVERNE SWANGLUD 230 NO. VECHIN BLUD OCEANRIDGE FL. 33435 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GOMMANDE 2 OBERTZIMNERMANN NAME 115W. 18 COURT STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE

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 a supplemental formation. Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS

CITY-ST-ZIP

411/06 561-736-7686

FILED

# ATTACHMENT

**Division of Corporations** 

60028631

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# **Division of Corporations**

## 2006 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the appropriate button at the bottom to generate the annual report

This information cannot be changed on the report.

Document Number

N01781

**Business Entity** Name

LEISUREVILLE POST NO. 10150 VETERANS OF FOREIGN WARS OF

THE UNITED STATES, INC.

Original File Date 03/05/1984

**FEI Number** 

59-1602695

Principal

P.O. BOX 4785

Address

**BOYNTON BEACH, FL 33424 US** 

Mailing Address

P.O. BOX 4785 **BOYNTON BEACH, FL 33424 US** 

Registered Agent ROBERT ZIMMERMAN

811 SW 18 CT

**BOYNTON BCH. FL 33426 US** 

### Officer/Director Name And Address

**TQM** STUART PRESTON 2080 SW 12 AVENUE BOYNTON BEACH, FL 33426

T EUGENE SWANK 6230 NO. OCEAN BLVD OCEAN RIDGE, FL 33435

**VDC** ROBERT ZIMMERMANN 811 SW 181H CT BOYNTON BCH, FL

Division of Corporations

ATTACHMENT

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T PETER ROMAS 814 SW 18 CT BOYNTON BEACH. FL 33426 #NO1781

T JOSEPH E PREMIAN 813 SW 18TH COURT BOYNTON BEACH, FL 33426

If all of the above information is correct and you do not wish to make any changes, please select:

No Changes

If you need to make changes to the above information, please select:

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