2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01781

1. Entity Name 👡

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



Apr 11, 2003 8:00 am Secretary of State 04-11-2003 90128 015 ****61.25

FILED

ZIMMERMAN, ROBERT 311 SW 18 CT BOYNTON BCH FL 33428 The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent and the fastication. SIGNATURE Signature, hose or preed name of legistered agent and the fastication. 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 the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent with a spirature agent agen				Į.					
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Name Street Address (P.O. Box Number is Not Acceptable)	Zip	Country	Zip	Countr	у	5. Certificate of S	Status Desired	\$8.75 Add	itional
Name Street Address (P.O. Box Number is Not Acceptable)	-	6. Name and Address of Curre	ent Registered Agent			7. Name and Ad	dress of New Registered		
B. 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 will the obligations of registered agent. SIGNATURE Signature typed or princip forms of registered agent and title of applicable. (NOTE Registered Agent signature required when reinstalling) DATE	811 SW 1	IAN, ROBERT 18 CT					•		
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 will the obligations of registered agent. SIGNATURE Signature, hyped or printed name of registered agent and still of applicable. (NOTE: Peopletered Agent signature required when reneating) DATE	BOYNTON	N BCH FL 33426			City			Zip Code	
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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:

Robert Agentan enganted 2

nander 4/8/03 561-136-1686

Attachment

2002 Form 1099-INT INTEREST INCOME

AMTRUST BANK
A DIVISION OF OHIO SAVINGS BANK
P O BOX 94764

Corrected (if checked)

CLEVELAND OH 44101-4764

NO17872

Forwarding Service Requested

TOLL FREE 1-888-696-4444

RECIPIENT'S IDENTIFICATION NUMBER 59-1602695 PAYER'S FEDERAL IDENTIFICATION NUMBER 34-0522772

ACCOUNT	NUMBER AND TYPE	BOX 1	BOX 2	BOX 3	BOX 4	BOX 5	BOX 6
0781004848	C/B	323.43	0.00	0.00	0.00	0.00	0.00
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TOTALS F	FOR FORM 1099-INT	323.43	0.00	0.00	0.00	0.00	0.0

KEEP THIS COPY FOR YOUR RECORDS. DO NOT ATTACH IT TO YOUR INCOME TAX RETURN. THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE (IRS). IF YOU ARE NOT REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.

Instructions for Recipient

- Box 1 Shows interest paid to you during the calendar year by the payer. This does not include interest shown in box 3. If you receive a Form 1099-INT for interest paid on a tax-exempt obligation, see the instructions for your income tax return.
- Box 2 Shows interest or principal forfeited because of early withdrawal of time savings. You may deduct this on the "Penalty on early withdrawal of savings" line of Form 1040.
- Box 3 Shows interest on U.S. Savings Bonds, Treasury bills, Treasury bonds, and Treasury notes. This may or may not be all taxable. See Pub. 550, Investment Income and Expenses. This interest is exempt from state and local income taxes.

 This interest is not included in box 1.
- Box 4 Shows backup withholding. Generally, a payer must backup withhold at a 30% rate if you did not furnish your taxpayer identification number to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.
- Box 5 Any amount shown is your share of investment expenses of a single-class REMIC. If you file Form 1040, you may deduct these expenses on the "Other expenses" line of Schedule A (Form 1040) subject to the 2% limit. This amount is included in box 1.
- Box 6 Shows foreign tax paid. You may be able to claim this tax as a deduction or a credit on your Form 1040. See your Form 1040 instructions.

Nominees - If this form includes amounts belonging to another person, you are considered a nominee recipient. Complete a Form 1099-INT for each of the other owners showing the income allocable to each. File Copy A of the form with the IRS. Furnish Copy B to each owner. List yourself as the "payer" and the other owner as the "recipient." File Form(s) 1099-INT with Form 1096, Annual Summary and Transmittal of U.S. Information Returns, with the Interal Revenue Service Center for your area. On Form 1096 list yourself as the "filer." A husband or wife is not required to file a nominee return to