

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012321

FILED  
Aug 27, 2007  
Secretary of State

Entity Name: WEST PLAM BEACH VFW POST 2007, INC.

## Current Principal Place of Business:

1126 CLARE AVENUE  
WEST PALM BEACH, FL 33401

## New Principal Place of Business:

## Current Mailing Address:

1126 CLARE AVENUE  
WEST PALM BEACH, FL 33401

## New Mailing Address:

FEI Number: 59-0979243      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

WELLING, FRANK  
845 TRIPP DRIVE  
WEST PALM BEACH, FL 33413      US

## Name and Address of New Registered Agent:

SCHEBELL, ANTHONY  
5281 CHELAN COVE  
LAKE WORTH, FL 33467      US

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: ANTHONY JOHN SCHEBELL

08/27/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: C      ( ) Delete  
Name: WELLING, FRANK  
Address: 845 TRIPP DR E  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: A      ( ) Delete  
Name: FORRIS, LESSLIO  
Address: 1026 UPLAND RD  
City-St-Zip: WEST PALM BEACH, FL 33436

Title: QM      (X) Delete  
Name: PIRO, OSVAIDO  
Address: 5601 PARK CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33405

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COMM      (X) Change ( ) Addition  
Name: SCHEBELL, ANTHONY J COMMAND  
Address: 5281 CHELAN COVE  
City-St-Zip: LAKE WORTH, FL 33467

Title: QM      (X) Change ( ) Addition  
Name: GRAVES, ROBERT B TRES.  
Address: 15170 79TH TERRACE  
City-St-Zip: PALM BCH. GARDENS, FL 3333418

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY J. SCHEBELL

COMM

08/27/2007

Electronic Signature of Signing Officer or Director

Date