## 2006 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT (AR)** DOCUMENT # N14872



## FILED Apr 04, 2006 8:00 am Secretary of State

1. Entity Name			04-04-2006 90146 050 ****61.25					
FORT PIERCE OF FOREIGN	E WESTSIDE POST NO. { I WARS OF THE UNITED	3058 VETERANS STATES, INC.	300		04-2000 70140 030	01.23		
Principal Place of Business		Mailing Address						
%PETER CAMACHO 3475 DOUGLAS RD FORT PIERCE FL 34951 US		%PETER CAMACHO PO BOX 1765 FORT PIERCE FL 34954-1765 US						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MC	1st MOORE CR2E037 (10/05)			
City & State		City & State		4. FEI Number	4. FEI Number			
Zip	Country	Zip	Country	5. Certificate of S	tatus Desired	\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent			Nome	7. Name and Address of New Registered Agent Name				
CAMACHO, PETER				Street Address (P.O. Box Number is Not Acceptable)				
	OKEECHOBEE ROAD PIERCE FL 34945	City			<u> </u>			
					FL	Zip Code	3	
SIGNATURE Stgna	of registered agent.  aure, typed or printed name of registered agent a  E NOW: FEE 1S \$61.25  Due By May 1, 2006	9. Election Cam Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make Chec Florida Depa			
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHANG	ES TO OFFICERS AND D	IRECTORS IN	10	
. STREET ADDRESS 519	AMS, JAMES 95 MARGARET ANN LANE RT PIERCE FL 49546	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
STREET ADDRESS 348	OUCH, GREGORY 14 SUNRISE BLVD RT PIERCE FL 34982	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
STREET ADDRESS 135	MACHO, PETER 601 OKEECHOBEE ROAD RT PIERCE FL 34954	Delete	NAME STREET ADDRESS GITY-ST-ZIP			☐ Change	☐ Addition	
STREET ADDRESS 612	EHL, HENRY 22 NW DAROCO TERRACE RT ST LUCIE FL 34948	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
STREET ADDRESS 111	CHECO, JOSEPH J 16 CLUB DR RT PIERCE FL 34982	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	R	ECEIVED	☐ Change	☐ Addition	
STREET ADDRESS 150	EGAN, RICHARD 194 AGUILA AVE RT PIERCE FL 34951	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CI	AR 2 4 2006 U REVIADW	☐ Change	Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: PETER CAMACHO Putu Commach TREASORER 3-21-66 772-464-1830