

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N15485

1. Entity Name
**PUNTA GORDA POST NO. 10192 VETERANS OF
FOREIGN WARS OF THE UNITED STATES, INC.**



Principal Place of Business
**115 MORNING STAR DR.
PUNTA GORDA, FL 33950-2330**

Mailing Address
**PO BOX 510968
PUNTA GORDA, FL 33951-0968**



02082005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1868634

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ROONEY, J. MICHAEL
306 EAST OLYMPIA AVENUE
PUNTA GORDA, FL 33950**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CASEY, JAMES
30232 OAK ROAD
PUNTA GORDA, FL 339821246**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
RUPSI, JOSEPH
150 W RETTA ESPLANADE #336
PUNTA GORDA, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
GOODENOW, GERALD
9339 MCEVER ST.
PUNTA GORDA, FL 33950**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
ROLL, DONALD F
115 MORNING STAR DR.
PUNTA GORDA, FL 339502330**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

100000238689
02/22/05-BU0009-023 61.25

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: *Donald F. Roll* **DONALD F. ROLL** **2-18-05** **941-639-6670**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #