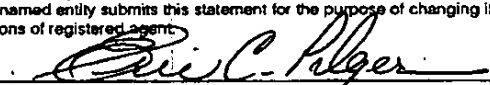
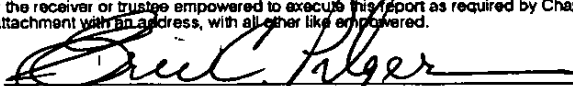


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 16, 2005 8:00 am
Secretary of State

02-18-2005 90065 021 ****70.00

DOCUMENT # N96000004113					
1. Entity Name WEST EAU GALLIE POST 3991, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.					
Principal Place of Business 2742 AURORA ROAD MELBOURNE FL 32935 US			Mailing Address 420 VIZCAYA CT MELBOURNE FL 32940 US		
2. Principal Place of Business			3. Mailing Address 661 HICKAM DR.		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State MELBOURNE, FLA.		
Zip	Country	Zip	Country	4. FEI Number 59-3191491	
32901	U.S.	32901	U.S.	Applied For ☐ Not Applicable ☐	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent DELANEY, JAMES P 420 VIZCAYA CT MELBOURNE FL 32940			7. Name and Address of New Registered Agent Name ERIC C. PILGER Street Address (P.O. Box Number is Not Acceptable) 661 HICKAM DRIVE City MELBOURNE, FL Zip Code 32901		
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 				DATE 2-15-05	
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS DELANEY, JAMES P. 420 VIZCAYA CT MELBOURNE FL 32940 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JARVIS, RAY JR. 4161 CAREY WOOD DR MELBOURNE FL 32934 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNYDER, NEVIN 3360 CHAPPARAL CT. MELBOURNE FL 32934 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SAWYER, KEN 2311 SKYWIND CIR MELBOURNE FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT PILGER, ERIC C 661 HICKAM DR MELBOURNE FL 32901 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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: 				Date 3-14-05 Daytime Phone # 321-956-6092	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					