## 2002 UNIFORM BUSINESS REPORT (UBR) FILED Feb 01, 2002 8:00 am DOCUMENT # N9900003610 1. Entity Name Secretary of State GENERAL CASIMIR PULASKI, POST 204, THE POLISH LE 02-01-2002 90010 001 \*\*\*\*61.25 GION OF AMERICAN VETERANS, U.S.A., INC. Principal Place of Business Mailing Address PO BOX 6541 PO BOX 6541 **DELTONA FL 32728 DELTONA FL 32728** DAU Hall 3. Mailing Address P.O. BOV 6541 301 Blue Springs Ave. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For -lorida PeltoNA 59-3585683 Not Applicable\* Country Country \$8.75 Additional ίλ<u>ς.</u>Δ 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DENSINGS, HENRY J - 5r. 935 VERCELLI STREET **DELTONA FL 32725** City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Delete TITLE ☐ Change ☐ Addition CR2E037 (9/01 NAME DENSING, HENRY SA. NAME STREET ADDRESS STREET ADDRESS 935 VERCELLI STREET CITY-ST-ZIP CITY-ST-ZIP DELTONA FL 32725 SVC ☐ Delete TITLE Change ☐ Addition NAME Kaminski, Robert J NAME STREET ADDRESS STREET ADDRESS 1460 E LOMBARTY DR CITY-ST-ZIP <u>Deltona FL 32725</u> TITLE JVC ☐ Delete TITLE ☐ Change ■ Addition NAME GREBOSZ, RONALD NAME STREET ADDRESS STREET ADDRESS 2000 SNOOK DR CITY-ST-ZIP CITY-ST-ZIP DELTONA FL 32725 NAME Change TITLE ☐ Delete TITLE Addition SKRZYPCZAK, RONALD Michael TSKRZYPCZAK, MICKHACI 1745 BAVON DRIVE DELTONA, Fl. 32725 NAME NAME STREET ADDRESS 1745 BAVON DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP <u>Deltona fl 32725</u> TITLE ☐ Delete ☐ Change ☐ Addition NAME MARCEAU, JOSEPH NAME STREET ADDRESS STREET ADDRESS 145 FLORENCE BLVD CITY-ST-ZIE CITY-ST-ZIP DEBARY FL 32713 TITLE ☐ Delete TITLE Zellinger, John 2359 Montano Street NAME ANDERSEN, BILL NAME STREET ADDRESS 2025 E BARLINGTON DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELTONA FL 32725

12. Thereby 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:

HENNY VINCENSIONALISED H
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 J. Densing, Sr

386-532-532

Daytime Phone #