NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N 990000 3610

1. Entity Name GENERAL CASIMIR PULASKI POST 204 THE POLISH LEGION OF



FILED Apr 21, 2004 8:00 am Secretary of State

04-21-2004 90094 005 ****61.25

4-17-04

MERICAN VETERAN.	s, USA, INC		2				
DO NOT WRITE	IN THIS SI	PACE					
incipal Place of Business AV HALL uite, Apt. #, etc.	3. Mailing Address P.O. BOX # 654/ Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
ity & State ANGE C 17Y, FL D Country	City & State DELTONA	FL Country	4. FEI Number EIN59-3585683				
763 USA	32725	ÜSA	Certificate of Status Desired Name and Address of Current Register	\$8.75 Additional Fee Required			
DÖ NOT WI	RITE	Name ROB Street Address	ERT J KAMINS (P.O. Box Number is Not Acceptable)	<u>ski</u>			
IN THIS SPACE		· 146	1460 E. LOMBARDY DR. City DELTONA FL 39925				
ne above named entity submits this statement for e obligations of registered agent.	the purpose of changing its	registered office or registe	red agent, or both, in the state of Florida. I an	n familiar with, and accept			

	Initial or Amended UBR Trust Fund Co	ontribution.		dded to Fees	Florida Department of State
10.	OFFICERS AND DIRECTORS				19 The second se
TITLE	COMMANDER	ATTLE SAME	um erickick um miggestationerig	n i de la compania de la calcana. Se el calcana de la calcana de la calcana.	. De la califación de la desenvación de la companya de la companya de la companya de la companya de la company La del companya de la companya de l
NAME	ROBERT J. KAMINSKI .	NAME			
STREET ADDRESS	1460 E. LOMBARDY DRIVE	STREET ADDRESS			
CITY-ST-ZIP	カミノナガリム たん ネンソンち	CITY-ST-ZIP			energia de la composição de la composição Reference de la composição
TITLE	SR. COMMANDER MICHAEL F. SKRZYPCAK	TITLE			
NAME	MICHAEL F. SKRZYPCAK	NAME			
STREET ADDRESS	1745 RAVAN DRIVE	Street Address			
CITY-ST-ZIP	DELTONA FL 32725	CITY-ST-ZIP	15 S		
TITLE	TR COMMANDER	TILE			
NAME	WILLIAM ANDERSON	NAME		ar artige agains	
	2025 E. BARLINGTON DR.	STREET ADDRESS	na la compressión de la compressión de La compressión de la		NOT WRITE
CITY-ST-ZIP	DELTONA FL 32125	CITY-ST-ZIP		<u> </u>	MOLWAILE
TITLE	3 YEAR TRUSTEE .	TITLE		an and INI.	THIS SPACE
NAME	LAWRENCE BUKOWSKI -	NAME			IIIIO OLAUL
STREET ADDRESS	3171 PIGEON COVE	STREET ADDRESS	an i Maranda (de la como de la co En la como de la como d	Service of the servic	
CITY-ST-ZIP	DELTONA FL 32725	CITY-ST-ZIP	1		
TITLE	2 YEAR TRUSTEE	TITLE			aliman kalingan permuan permuan permuan kalingan permuan permuan permuan permuan permuan permuan permuan permu Permuan permuan permua
NAME	JOHN ZELLINGER	NAME	and the second	eta antagon berkanta (b. 1964) Maria dengan berkanta	and the second of the second o
STREET ADDRESS	2359 MONTANO STREET	STREET ADDRESS	Tarifichian Tarifichian Tarifichian	e transfer and a second	er an anti-market and a second a
CITY-ST-ZIP	DELTONA FL 32738	CITY-ST-ZIP			
TITLE	I YEAR TRUSTEE	"TITLE " THE CONTROL OF	att frævallen. And in Sindhalade	ere of the state o	
NAME	EDWARD J. ORAVETZ	NAME			
STREET ADDRESS	1912 E. CHAPEL DRIVE	STREET ADDRESS			ring and the second second Second second
CITY-ST-ZIP	DELTONA FL 32738	CITY+ST-2IP	610 610		

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 on an attachment with an address, with all other like empowered.

SIGNATURE: