

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717150

FILED
May 01, 2008
Secretary of State

Entity Name: INDIAN ROCKS POST NO. 10094 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

14268 WALSLINGHAM RD
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

P O BOX 133
INDIAN ROCKS BEACH, FL 33785

New Mailing Address:

FEI Number: 23-7010567 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SURFACE, STEPHEN R
12460 91 WAY N
LARGO, FL 33773 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DELL, JOHN A
Address: 1587 PENNWOOD CIR S
City-St-Zip: CLEARWATER, FL 33756

Title: VD () Delete
Name: ORNDOFF, JAMES L
Address: 1250 OAKBROOK DR
City-St-Zip: LARGO, FL 33770

Title: TDQ () Delete
Name: SURFACE, STEPHEN R
Address: 12460 91 WAY N
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ORNDOFF, JAMES
Address: 1250 OAKBROOK DR
City-St-Zip: LARGO, FL 33770

Title: VD (X) Change () Addition
Name: HAYNES, WILLIAM
Address: 10026 BAHAMA COURT
City-St-Zip: SEMINOLE, FL 33776

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES ORNDOFF

PD

05/01/2008

Electronic Signature of Signing Officer or Director

Date