

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722440

FILED
Jan 06, 2009
Secretary of State

Entity Name: FRED H. REILAND POST 4250 VETERANS OF FOREIGN WARS OF THE UNITED STATES INC.

Current Principal Place of Business:

2350 SUNSET DR.
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

2350 SUNSET DR.
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

FEI Number: 59-6161982 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GLASCO, LAWRENCE W
4665 KOLA ROAD
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

CLAYSON, THOMAS A
5100 SOUTH RIDGEWOOD AVENUE
DAYTONA BEACH, FL 32127 US

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: THOMAS A CLAYSON

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GLASCO, LAWRENCE W
Address: 4665 KOLA ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VP () Delete
Name: CLAYSON, TOM
Address: 5100 RIDGEWOOD AVE
City-St-Zip: PORT ORANGE, FL 32127

Title: S () Delete
Name: FRESHWATERS, ROBERT
Address: 2834 BROOKLINE AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T () Delete
Name: MORALL, JAN E
Address: 717 PHYLLIS AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLAYSON, THOMAS A
Address: 5100 SOUTH RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32127

Title: VP (X) Change () Addition
Name: BROTHERTON, GRATTON R
Address: 3418 UMBRELLA TREE DRIVE
City-St-Zip: EDGEWATER, FL 32141

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

Title: T (X) Change () Addition
Name: MORELL, JAN E
Address: 717 PHYLLIS AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: JAN E MORELL

T

01/06/2009

Electronic Signature of Signing Officer or Director

Date