2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 19, 2007 8:00 am
Secretary of State
07-19-2007 90024 006 ****70.00

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1. Entity Name
A.E.M. POST NO. 4287, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INCORPORATED

Principal Place of Business	Mailing Address
AEM POST 4287 3500 S GOLDENROD RD ORLANDO, FL 32822 US	AEM POST 4287 P.O. BOX 720100 ORLANDO, FL 32872

02062007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 23-7069121 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BATCHELDER, STEPHEN H 10073 DORIATH CIRCLE ORLANDO, FL 32825	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: S. Batchelder STEPHEN H. BATCHELDER 02/06/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

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	D NEAR, GARY W 8019 CAPT MORGAN BLVD. ORLANDO, FL 32822	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BATCHELDER, STEPHEN H 10073 DORIATH CIRCLE ORLANDO, FL 32825	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PARKER, PHILIP R 2806 AHERN DR. ORLANDO, FL 32817	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ELLIS, WILLIAM, F 8305 SCARBOROUGH CT. ORLANDO, FL 32829	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BRAY, AUTHUR F 7944 HATTERAS RD ORLANDO, FL 32822	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JACKOWSKI, BERNARD R 2941 CONDEL DRIVE ORLANDO, FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JOHNSON, WAYNE, R 7710 DRETWYLER DR ORLANDO, FL 32821	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SHOEMAKER, RICHARD F 4410 USHER AVE ORLANDO, FL 32822	☐ 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 exemptions contained 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 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: S. Batchelder STEPHEN H. BATCHELDER 02/06/07 407 273-6581
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #