2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02607

FILED Feb 19, 2009 Secretary of State

Entity Name: JEWISH WAR VETERANS POST 520, INC.

Current Principal Place of Business: New Principal Place of Business:

POST OFFICE BOX 6404 5800 FERNLY DR.

LAKE WORTH, FL 334663404 US #72

WEST PALM BEACH, FL 33415 US

Current Mailing Address: New Mailing Address:

P. O. BOX 6404

LAKE WORTH, FL 334663404 US

FEI Number: 59-2405822 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GORDON, HERB SHAPKIN, PHILIP 252 SOUTHAMPTON

LAKE WORTH, FL 33467 US WEST PALM BEACH, FL 33417 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: PHILIP SHAPKIN 02/19/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:TD () DeleteTitle:TD (X) Change () AdditionName:KIRSCHNER, SEYMOUR,Name:KIRSCHNER, SEYMOUR,Address:4702 LUCERNE LKS BLVD EAddress:4702 LUCERNE LKS BLVD ECity-St-Zip:LAKE WORTH, FL 33467City-St-Zip:LAKE WORTH, FL 33467 US

 Name:
 SHAPKIN, PHILIP
 Name:
 SHAPKIN, PHILIP

 Address:
 252 S HAMPTON C
 Address:
 252 SOUTHAMPTON C

City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VD () Delete Title: VD (X) Change () Addition

Name: BERMAN, JULIUS Name: GLASSMAN, HERMAN

Address: 6999 LUPIN LANE Address: 5800 FERNLY DR.

City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: WEST APLM BEACH, FL 33415 US

 $\label{eq:title:Title:VD} \mbox{Title:} \mbox{VD} \mbox{ () Change (X) Addition}$

 Name:
 Name:
 ROSEN, SAM

 Address:
 Address:
 102 GREENBRIAR

City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: () Delete Title: VD () Change (X) Addition Name: FISHER, GEORGE

Address: Address: 3456 S. OCEAN BLVD. # 503

City-St-Zip: City-St-Zip: PALM BEACH, FL 33480 US

Title: () Delete Title: VD () Change (X) Addition

 Name:
 Name:
 GORDON, HERBERT

 Address:
 Address:
 8250 LAKE CYPRESS RD.

 City-St-Zip:
 City-St-Zip:
 LAKE WORTH, FL 33467 US

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: PHILIP SHAPKIN D 02/19/2009