## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012610

FILED Apr 10, 2007 Secretary of State

Entity Name: UNITED STATES NATIONAL DEFENSE FORCE SUPPORT COMMAND CORPORATION OF FLORIDA

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

7750 WEST MCNAB ROAD 101

TAMARAC, FL 33321

Current Mailing Address: New Mailing Address:

7750 WEST MCNAB ROAD 101 TAMARAC, FL 33321

FEI Number: 20-5866167 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

 DWECK, DAVID
 DWECK, DAVID

 7750 WEST MCNAB ROAD
 7750 WEST MCNAB ROAD

 101
 101

 TAMARAC, FL 33321 S
 TAMARAC, FL 33321 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: 04/10/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 DWECK, DAVID
 Name:
 DWECK, DAVID

 Address:
 P.O. BOX 591013
 Address:
 P.O. BOX 591013

City-St-Zip: FORT LAUDERDALE, FL 333591013 City-St-Zip: FORT LAUDERDALE, FL 333591013

Title: S/T ( ) Delete Title: STD (X) Change ( ) Addition

 Name:
 HARMS, JULIE L
 Name:
 HARMS, JULIE L

 Address:
 8301 ELM PARK DRIVE #6212
 Address:
 8301 ELM PARK DRIVE #6212

City-St-Zip: ORLANDO, FL 32821 City-St-Zip: ORLANDO, FL 32821

Title: VP ( ) Delete Title: VPD (X) Change ( ) Addition

Name:BARNES, JAMES LName:BARNES, JAMES LAddress:366 WEST MAIN STREET #7Address:366 WEST MAIN STREET #7City-St-Zip:HENDERSONVILLE, TN 37075City-St-Zip:HENDERSONVILLE, TN 37075

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID DWECK PD 04/10/2007