

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49665

Entity Name: AMERICAN VETERANS POST 1992, INC

FILED
Mar 19, 2004
Secretary of State

Current Principal Place of Business:

AMVETS POST 1992 INC
31116-F FAIRVIEW AVE
TAVARES, FL 32778 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 492722
LEESBURG, FL 34749 US

New Mailing Address:

FEI Number: 59-3129495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, CHARLES D
907 WEBSTER STREET
LEESBURG, FL 34779 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: P () Delete
Name: BAGGETT, ALLEN
Address: 31116 FAIRVIEW AVE
City-St-Zip: TAVARES, FL 32778

Title: V () Delete
Name: MUMBLO, DAVID
Address: 31116 FAIRVIEW AVE
City-St-Zip: TAVARES, FL 32778

Title: V () Delete
Name: WEGGLES, FRED
Address: 11329 LAKEVIEW PLACE
City-St-Zip: LEESBURG, FL 34788

Title: D () Delete
Name: WATSON, JOHN
Address: 3116 FAIRVIEW AVE
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: CASWELL, PAUL
Address: 31116 FAIRVIEW AVE
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: HOLSTON, PAUL
Address: 31116 FAIRVIEW AVE
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: BRIENIK, RICHARD
Address: 31116 FAIRVIEW AVE
City-St-Zip: TAVARES, FL 32778

Title: V (X) Change () Addition
Name: WHEELER, H.
Address: 11329 LAKEVIEW PLACE
City-St-Zip: LEESBURG, FL 34788

Title: D (X) Change () Addition
Name: ROBERTS, L.
Address: 3116 FAIRVIEW AVE
City-St-Zip: TAVARES, FL 32778

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

Title: D (X) Change () Addition
Name: HOLSTON, PETE
Address: 31116 FAIRVIEW AVE
City-St-Zip: TAVARES, FL 32778

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALLEN BAGGETT

P

03/19/2004

Electronic Signature of Signing Officer or Director

Date