## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N49665

**FILED** Feb 23, 2005 Secretary of State

Entity Name: AMERICAN VETERANS POST 1992, INC

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

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

**New Mailing Address: Current Mailing Address:** 

P.O. BOX 492722

LEESBURG, FL 34749 US

FEI Number: 59-3129495 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:

JOHNSON, CHARLES D 907 WEBSTER STREET LEESBURG, FL 34779 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:

Name:

Address:

City-St-Zip:

31116 FAIRVIEW AVE

TAVARES, FL 32778

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete BAGGETT, ALLEN WHEELER, HOLLIS Name: Name:

31116 FAIRVIEW AVE Address: 31116 FAIRVIEW AVE Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: () Delete Title: () Change () Addition BRIENIK, RICHARD Name: Name:

Address: 31116 FAIRVIEW AVE Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip:

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

WHEELER, H. Name: YOUNG, BILL Name: 31116 FAIRVIEW AVE Address: 11329 LAKEVIEW PLACE Address: City-St-Zip: LEESBURG, FL 34788 City-St-Zip: TAVARES, FL 32778

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

Name: ROBERTS, L. Name: CROWE, LINDA 3116 FAIRVIEW AVE Address: Address: 3116 FAIRVIEW AVE City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

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

CASWELL, PAUL HOLSTON, PETE Name: Name: 31116 FAIRVIEW AVE 31116 FAIRVIEW AVE Address: Address: City-St-Zip: TAVARES, FL 32778 City-St-Zip: TAVARES, FL 32778

Title: () Delete Title: (X) Change ( ) Addition HOLSTON, PETE

LACKEY, JAMES Name: Address: 31116 FAIRVIEW AVE TAVARES, FL 32778 City-St-Zip:

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: HOLLIS WHEELER Ρ 02/23/2005