2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49665

FILED Jan 16, 2006 Secretary of State

Entity Name: AMERICAN VETERANS POST 1992, INC

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

AMVETS POST 1992 32201 AMVETS WAY MT. DORA, FL 32757 US

Current Mailing Address: New 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

OFFICERS AND DIRECTORS:

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

Electronic eignature er regiet

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WHEELER, HOLLIS
 Name:
 KINDRED, LARRY

 Address:
 32201 AMVETS WAY
 Address:
 32201 AMVETS WAY

 City-St-Zip:
 MT. DORA, FL 32757 US
 City-St-Zip:
 MT. DORA, FL 32757 US

 $\label{eq:total_times} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$

 Name:
 BRIENIK, RICHARD
 Name:

 Address:
 32201 AMVETS WAY
 Address:

 City-St-Zip:
 MT. DORA, FL 32757 US
 City-St-Zip:

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$

 Name:
 YOUNG, BILL
 Name:
 MAY, BILL

 Address:
 32201 AMVETS WAY
 Address:
 32201 AMVETS WAY

 City-St-Zip:
 MT. DORA, FL 32757 US
 City-St-Zip:
 MT. DORA, FL 32757 US

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

 Name:
 CROWE, LINDA
 Name:
 HOLSTON, PETE

 Address:
 32202 AMVETS WAY
 Address:
 32202 AMVETS WAY

 City-St-Zip:
 MT. DORA, FL 32757 US
 City-St-Zip:
 MT. DORA, FL 32757 US

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

 Name:
 HOLSTON, PÉTE
 Name:
 PAYTON, TOM

 Address:
 31116 FAIRVIEW AVE
 Address:
 32202 AMVETS WAY

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 MT. DORA, FL 32757

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

 Name:
 LACKEY, JAMES
 Name:
 DOREMUS, HARRY

 Address:
 31116 FAIRVIEW AVE
 Address:
 32201 AMVETS WAY

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 MT. DORA, FL 32757

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: LARRY KINDRED P 01/16/2006