

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 19, 2006
Secretary of State**

DOCUMENT# N98000001759

Entity Name: ALLIED VETERANS OF THE WORLD, INC: & AFFILIATES POST NO. 5 AUXILIARY INC.

Current Principal Place of Business:

551143 US HWY 1
HILLIARD, FL 32046 US

New Principal Place of Business:

542830 US HWY 1
CALLAHAN, FL 32011 US

Current Mailing Address:

541530 US HWY 1
HILLIARD, FL 32046 US

New Mailing Address:

542830 US HWY 1
CALLAHAN, FL 32011 US

FEI Number: 59-3478011 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FOREHAND, WILLIAM
541522 US HWY #1
HILLIARD, FL 32046 US

Name and Address of New Registered Agent:

FOREHAND, WILLIAM
542830 US HWY #1
CALLAHAN, FL 32011 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: _____

07/19/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VT () Delete
Name: LEWEY, LINDA
Address: 541522 U.S. HWY. #1
City-St-Zip: HILLIARD, FL 32046 US

Title: VT () Delete
Name: HUGHES, RUBY
Address: 12024 CANDLEWICK LANE
City-St-Zip: JACKSONVILLE, FL 32225

Title: ST () Delete
Name: LOUN, DORIS
Address: 8604 GRAYBAR DR.
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: WILLIAM FOREHAND

COMM

07/19/2006

Electronic Signature of Signing Officer or Director

Date