


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 8:00 am
Secretary of State

01-11-2008 90035 043 ****70.00

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1. Entity Name
VERO BEACH POST 3918 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.



Principal Place of Business
**1535 OLD DIXIE HIGHWAY
 VERO BEACH, FL 32961**

Mailing Address
**1535 OLD DIXIE HIGHWAY
 VERO BEACH, FL 32960**

40001232



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01062008 Chg-NP CR2E037 (12/06)

City & State
 Zip Country

4. FEI Number
59-2972278

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent

**FAULKINGHAM, LLOYD
 8775 20TH ST. LOT #126
 VERO BEACH, FL 32966**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C FISKE, PETER 2046 15TH ST SW VERO BEACH, FL | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | QM FAULKINGHAM, LLOYD L 8775 20TH ST. LOT #126 VERO BEACH, FL 32966 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SVRC SPEZIRLE, VITO A 525 16TH AVE VERO BEACH, FL 32962 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T ANDERSON, RIVERS P O BOX 61 VERO BEACH, FL 32961 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T HORAN, HARDY J 2138 20TH AVE VERO BEACH, FL 32960 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TR MCKENZIE, JOHN 1775 76TH TER SW VERO BEACH, FL 32968 | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C BROWN, WALTER 1761 5TH AVE. VERO BEACH, FL, 32960 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T FISKE, PETER 2046 15TH ST, SW VERO BEACH, FL, 32962 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lloyd Faulkingham **01/07/2008** (773) 770-0444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #