4619 BARTEL HOLIDAY, FL				
Current Ma	ling Address:			
4619 BART				
HOLIDAY, I	FL 34690			
FEI Number: 27-2146823			Certificate of Status Desired: No	
Name and Address of Current Registered Agent:				
GALBRAITH, EDWARD 4619 BARTELT RD. HOLIDAY, FL 34690 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.				
The above name	d entity submits this statement for the purpose of changing its reg	istered office or regis	tered agent, or both, in the State of Flo	rida.
	d entity submits this statement for the purpose of changing its reg E: EDWARD GALBRAITH	istered office or regis	tered agent, or both, in the State of Flo	<sup>rida.</sup> 01/11/2015
		istered office or regis	tered agent, or both, in the State of Flo	
SIGNATURI	E: EDWARD GALBRAITH	istered office or regis	tered agent, or both, in the State of Floi	01/11/2015
SIGNATURI	E: EDWARD GALBRAITH Electronic Signature of Registered Agent	istered office or regis	tered agent, or both, in the State of Flou	01/11/2015
SIGNATURI Officer/Dire	E: EDWARD GALBRAITH Electronic Signature of Registered Agent Ctor Detail :			01/11/2015
SIGNATURI Officer/Dire	E EDWARD GALBRAITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	SECRETARY	01/11/2015
SIGNATURI Officer/Dire Title Name	E: EDWARD GALBRAITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT GALBRAITH, EDWARD 3150 BEACON SQUARE RD.	Title Name	SECRETARY GERRY, WILLIAM A. 3917 STRATFIELD DR.	01/11/2015 Date
SIGNATURI Officer/Dire Title Name Address	E: EDWARD GALBRAITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT GALBRAITH, EDWARD 3150 BEACON SQUARE RD.	Title Name Address	SECRETARY GERRY, WILLIAM A. 3917 STRATFIELD DR.	01/11/2015 Date
SIGNATURI Officer/Dire Title Name Address City-State-Zip:	E: EDWARD GALBRAITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT GALBRAITH, EDWARD 3150 BEACON SQUARE RD. HOLIDAY FL 34691	Title Name Address	SECRETARY GERRY, WILLIAM A. 3917 STRATFIELD DR.	01/11/2015 Date
SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title	E EDWARD GALBRAITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT GALBRAITH, EDWARD 3150 BEACON SQUARE RD. HOLIDAY FL 34691 TREASURER	Title Name Address	SECRETARY GERRY, WILLIAM A. 3917 STRATFIELD DR.	01/11/2015 Date

I hereby 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 all other like empowered.

SIGNATURE: LEONARD E. GLOVER

Electronic Signature of Signing Officer/Director Detail

TREASURER

01/11/2015 Date

## FILED Jan 11, 2015 **Secretary of State** CC3500332252

## POST 10167 INC. **Current Principal Place of Business:**

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: MEN'S AUXILIARY TO THE VETERANS OF FOREIGN WARS

4619 BARTELT RD.

DOCUMENT# N1000002738