2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: AMERICAN VETERANS POST 1992, INC

Current Principal Place of Business:

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

Current Mailing Address:

P.O. BOX 492722
LEESBURG, FL 34749 US

FEI Number: 59-3129495

Certificate of Status Desired: No

Name and Address of Current 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	COMMANDER
Name	PAYTON, TOM
Address	P.O. BOX 492722
City-State-Zip:	LEESBURG FL 34749

Title	1VP
Name	MAY, BILL
Address	P.O. BOX 492722
City-State-Zip:	LEESBURG FL 34749

Title	2VP
Name	TUCKER, JAMES
Address	P.O. BOX 492722
City-State-Zip:	LEESBURG FL 34749

Title	JA
Name	LUYSTER, LLOYD
Address	P.O. BOX 492722
City-State-Zip:	LEESBURG FL 34749

Title	T
Name	LUKE, ED
Address	32201 AMVETS WAY
City-State-Zip:	MT. DORA FL 32757

Title	TTEE
Name	DOYLE, DAN
Address	32201 AMVETS WAY
City-State-Zip:	MT. DORA FL 32757

Title	CHAPLAIN
Name	PEARSON, BURT
Address	P.O. BOX 492722
City-State-Zip:	LEESBURG FL 34749

Title	PROVOST MARSHALL
Name	FRAZIER, FRANK
Address	P.O. BOX 492722
City-State-Zip:	LEESBURG FL 34749

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: TOM PAYTON COMMANDER 03/06/2014

Electronic Signature of Signing Officer/Director Detail — Date