

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709049

FILED
Jan 20, 2009
Secretary of State

Entity Name: SEMINOLE POST #9272, VETERANS OF FOREIGN WARS OF THE UNITED STATES,
INCORPORATED

Current Principal Place of Business:

10997 72 AVENUE, NORTH
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

10997 72 AVENUE, NORTH
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 59-6162557 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CLIFFORD, KEVIN M
6475 SHORELINE DRIVE 5045
SAINT PETERSBURG, FL 33708 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: REEP, DOUGLAS R
Address: 8205 118TH AVE
City-St-Zip: LARGO, FL 33773

Title: 1VC () Delete
Name: DUBOIS, RICHARD
Address: 9860 62ND TERRANCE #1043
City-St-Zip: ST PETERSBURG, FL 33708

Title: 2VC () Delete
Name: KENNEDY, JOHN B
Address: 7606 RIDGE ROAD
City-St-Zip: SEMINOLE, FL 33772

Title: QM () Delete
Name: CLIFFORD, KEVIN M
Address: 6475 SHORELINE DRIVE 5405
City-St-Zip: SAINT PETERSBURG, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: DUBOIS, RICHARD C
Address: 9860 62ND TERRANCE N # 1043
City-St-Zip: ST PETERSBURG, FL 33708

Title: 1VC (X) Change () Addition
Name: SILLS, JAMES H
Address: 8369 120TH ST
City-St-Zip: SEMINOLE, FL 33772

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 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: KEVIN M CLIFFORD

QM

01/20/2009

Electronic Signature of Signing Officer or Director

Date