

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 12, 2008**  
**Secretary of State**

DOCUMENT# 717150

**Entity Name:** INDIAN ROCKS POST NO. 10094 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.**Current Principal Place of Business:**14268 WALSINGHAM RD  
LARGO, FL 33774**New Principal Place of Business:****Current Mailing Address:**P O BOX 133  
INDIAN ROCKS BEACH, FL 33785**New Mailing Address:****FEI Number:** 23-7010567**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SURFACE, STEPHEN R  
12460 91 WAY N  
LARGO, FL 33773 US**Name and Address of New Registered Agent:**BARBER, SCOTT H  
914 10TH AVE SW  
LARGO, FL 33770 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: SCOTT H. BARBER

08/12/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** ORNDOFF, JAMES  
**Address:** 1250 OAKBROOK DR  
**City-St-Zip:** LARGO, FL 33770**Title:** VD ( ) Delete  
**Name:** HAYNES, WILLIAM  
**Address:** 10026 BAHAMA COURT  
**City-St-Zip:** SEMINOLE, FL 33776**Title:** TDQ ( ) Delete  
**Name:** SURFACE, STEPHEN R  
**Address:** 12460 91 WAY N  
**City-St-Zip:** LARGO, FL 33773**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** TDQ (X) Change ( ) Addition  
**Name:** KRAMER, JAMES  
**Address:** 14099 BELCHER RD LOT 1262  
**City-St-Zip:** LARGO, FL 33771**Title:** VD ( ) Change (X) Addition  
**Name:** BARBER, SCOTT H  
**Address:** 914 10TH AVE SW  
**City-St-Zip:** LARGO, FL 33770

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: SCOTT H. BARBER

VD

08/12/2008

Electronic Signature of Signing Officer or Director

Date