2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718348

FILED Jan 09, 2009 Secretary of State

Entity Name: MILITARY OFFICERS ASSOCIATION OF AMERICA, IMPERIAL POLK COUNTY CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

6550 CREWS LK HILLS LP E. 6550 CREWS LAKE HILLS LOOP E.

LAKELAND, FL 33813 LAKELAND, FL 33813

Current Mailing Address: New Mailing Address:

P.O. BOX 3911 LAKELAND, FL 33802

FEI Number: 23-7333103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KRAUSE, KENNETH E SR 6550 CRÉWS LAKE HILLS LP E. LAKELAND, FL 33813

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete KRAUSE, KENNETH E SR KRAUSE, KENNETH E SR Name: Name:

6550 CREWS LAKE HILLS LOOP EAST Address: 6550 CREWS LAKE HILLS LOOP E Address:

City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33813

Title: Title: (X) Change () Addition () Delete WORTMAN, JOSEPH B Name: DANIEL, DAVID G PRES Name:

Address: 5063 WINDOVER LANE Address: 4011 CHEVERLY LANE City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33813

Title: () Delete Title: (X) Change () Addition CLARK, GARY COL CLARK, GARY E Name: Name:

2613 TWELVE POINT DRIVE 2613 TWELVE POINT DRIVE Address: Address:

City-St-Zip: LAKELAND, FL 33811 City-St-Zip: LAKELAND, FL 33811

() Delete Title: Title: (X) Change () Addition SELVAGE, COL DONALD R Name: Name: SELVAGE, DONALD R 4493 FAIRWAY OAKS DRIVE 4493 FAIRWAY OAKS DRIVE Address: Address:

City-St-Zip: MULBERRY, FL 33860 City-St-Zip: MULBERRY, FL 33860 Title: PD () Delete Title: () Change () Addition

MCDONOUGH, JOSEPH Name: Name: 7530 GUNSTOCK DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip:

Title: () Delete Title: () Change () Addition

FELLNER, RON Name: Name: Address: 5121 ST. LUCIA DR. Address: LAKELAND, FL 33813 City-St-Zip: 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: KENNETH E. KRAUSE, SR. **TREA** 01/09/2009