2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#720819

FILED Oct 21, 2009 Secretary of State

Entity Name: HAROLD C. BUCK MEMORIAL POST NO. 4254 VETERANS OF FOREIGN WARS OF THE US INC.

Current Principal Place of Business:

10972 K-9 DRIVE
BONITA SPRINGS, FL 34135

Current Mailing Address: New Mailing Address:

10972 K-9 DRIVE BONITA SPRINGS, FL 34135

FEI Number: 59-6162501 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:

FREETAGE, WILLIAM 32 KOUNTRY AIRE DR BONITA SPRINGS, FL 34135 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: WILLIAM FREETAGE

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: C () Delete Title: () Change () Addition

 Name:
 FREETAGE, WILLIAM
 Name:

 Address:
 10972 K-9 DR.
 Address:

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:

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

 Name:
 ROSS, RUSSELL
 Name:

 Address:
 10972 K-9 DR
 Address:

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:

Title: ADJ. () Delete Title: JR.V (X) Change () Addition

 Name:
 HUEBBE, GREGORY S
 Name:
 DANIEL, ROY

 Address:
 10972 K-9 DR
 Address:
 10972 K-9 DR

City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: BONITA SPRINGS, FL 34135

Title: SR.V () Delete Title: () Change () Addition

 Name:
 GODEIA, CLARENCE
 Name:

 Address:
 10972 K-9 DR
 Address:

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 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: RUSSELL ROSS Q 10/21/2009