2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#721087

FILED Oct 31, 2009 Secretary of State

Entity Name: VETERANS OF FOREIGN WARS POST NO. 4143, INC.

	rincipal Place of Business:	New Principal Place of Bus	iness:	
2404 BRC RIVIERA E	ADWAY BEACH, FL 334044533			
	52, (6), (7) 2, (6) 10 11 10 10			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
2404 BRC				
RIVIERA E	BEACH, FL 334044533			
n accordar	r: 59-6162494 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did d Address of Current Registered Agent:		tificate of Status Desired (X) Registered Agent:	
HESS, DU 2404 BRC RIVIERA E				
	e named entity submits this statement for the e of Florida.	purpose of changing its registered office	or registered agent, or both,	
SIGNATU	RE: DUANE C. HESS			
	Electronic Signature of Registered A	gent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Γitle:	C () Delete	. ,	nge () Addition	
Name: Address:	VALIQUETTE, JOHN D 3559 BURMA CT.	Name: Address:		
City-St-Zip:	P. BCH GDNS, FL 33403	City-St-Zip:		
Γitle:	T () Delete	Title: () Char	nge () Addition	
	GREEN, EDWARD G JR.	Name:		
	5200 NODTH ELACIED DDIVE #1104	Addross:		
\ddress:	5200 NORTH FLAGLER DRIVE #1104	Address:		
\ddress:	WEST PALM BEACH, FL 33407	City-St-Zip:		
Address: Dity-St-Zip:		City-St-Zip:	nge () Addition	
Address: City-St-Zip: Fitle: Name:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE	City-St-Zip: Title: () Char Name:	nge () Addition	
Address: City-St-Zip: Fitle: Name: Address:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE.	City-St-Zip: Title: () Char Name: Address:	nge () Addition	
Address: City-St-Zip: Fitle: Name: Address:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE	City-St-Zip: Title: () Char Name:	nge () Addition	
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE.	City-St-Zip: Title: () Char Name: Address: City-St-Zip:	nge () Addition	
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete KOENIG, EDWARD	City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name:		
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete	City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char		
Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete KOENIG, EDWARD 3181 GROVE RD. PALM BEACH GARDENS, FL 33410	City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip:	nge () Addition	
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Fitle: Fitle: Fitle: Fitle: Fitle: Fitle: Fitle:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete KOENIG, EDWARD 3181 GROVE RD.	City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip:		
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address: Address: Address:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete KOENIG, EDWARD 3181 GROVE RD. PALM BEACH GARDENS, FL 33410 Q () Delete HESS, DUANE 2404 BROADWAY	City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address:	nge () Addition	
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address: Address: Address:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete KOENIG, EDWARD 3181 GROVE RD. PALM BEACH GARDENS, FL 33410 Q () Delete HESS, DUANE	City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip:	nge () Addition	
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: City-St-Zip: City-St-Zip: City-St-Zip:	WEST PALM BEACH, FL 33407 D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete KOENIG, EDWARD 3181 GROVE RD. PALM BEACH GARDENS, FL 33410 Q () Delete HESS, DUANE 2404 BROADWAY	City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip: City-St-Zip: City-St-Zip:	nge () Addition	
Name: Address: City-St-Zip: Fitle: Name: Name: Name: Name: Name:	D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete KOENIG, EDWARD 3181 GROVE RD. PALM BEACH GARDENS, FL 33410 Q () Delete HESS, DUANE 2404 BROADWAY RIVIERA BEACH, FL 33404	City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip: Title: () Char Name: Address: City-St-Zip: City-St-Zip: City-St-Zip:	nge () Addition	
Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Title: Title: Title: Title: Title:	D () Delete CLARK, MAURICE 1670 AVE. RIVIERA BEACH, FL 33404 P.C. () Delete KOENIG, EDWARD 3181 GROVE RD. PALM BEACH GARDENS, FL 33410 Q () Delete HESS, DUANE 2404 BROADWAY RIVIERA BEACH, FL 33404 D () Delete	City-St-Zip: Title: () Char Name: Address: City-St-Zip:	nge () Addition	

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: JOHN D. VALIQUETTE C 10/31/2009