

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723286

FILED
Apr 25, 2006
Secretary of State

Entity Name: THE SOCIETY OF FORTY MEN AND EIGHT HORSES BREVARD COUNTY, FLORIDA, POST 954, INC.

Current Principal Place of Business:

241 PEACHTREE STREET
COCOA, FL 32922 US

New Principal Place of Business:

Current Mailing Address:

3990 AIRLIFT STREET
COCOA, FL 329273902 US

New Mailing Address:

FEI Number: 59-6159265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, JOHN W
3990 AIRLIFT STREET
COCOA, FL 329273902 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: SB () Delete
Name: ABERNETHY, ROBERT
Address: 5932 CEDAR LAKE DRIVE
City-St-Zip: COCOA, FL 329274965

Title: DE () Delete
Name: SLAVEN, CHARLES E JR
Address: 315 NORWOOD STREET
City-St-Zip: MERRITT ISLAND, FL 32955

Title: DE () Delete
Name: WISEMAN, JOHN
Address: 125 WOLFHOUD LANE
City-St-Zip: SUMMERVILLE, SC 294838018

Title: PT () Delete
Name: WALKER, JOHN W
Address: 3990 AIRLIFT STREET
City-St-Zip: COCOA, FL 329273902

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 W. WALKER

PT

04/25/2006

Electronic Signature of Signing Officer or Director

Date