2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723393

FILED Mar 04, 2008 Secretary of State

Entity Name: A.E.M. POST NO. 4287, VETERANS OF FOREIGN WARS OF THE UNITED STATES, **INCORPORATED Current Principal Place of Business: New Principal Place of Business:** AEM POST 4287 3500 S GOLDENROD RD ORLANDO, FL 32822 **New Mailing Address: Current Mailing Address:** AEM POST 4287 P.O. BOX 720100 ORLANDO, FL 32872 FEI Number: 23-7069121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BATCHELDER, STEPHEN H 10073 DORIATH CIRCLE ORLANDO, FL 32825 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition NEAR, GARY W Name: Name: 8019 CAPT MORGAN BLVD. Address: Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: Title: () Delete Title: () Change () Addition BATCHELDER, STEPHEN H Name: Name: Address: 10073 DORIATH CIRCLE Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: () Delete Title: () Change () Addition ELLIS, WILLIAM F Name: Name: 8305 SCARBOROUGH CT Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: (X) Change () Addition Title: () Delete Title: BRAY, AUTHUR F Name: Name: SHOEMAKER, RICHARD F 7944 HATTERAS RD Address: Address: 4410 USHER AVE City-St-Zip: ORLANDO, FL 32822 City-St-Zip: ORLANDO, FL 32822 Title: () Delete Title: () Change () Addition JACKOWSKI, BERNARD R Name: Name: 2941 CONDEL DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: (X) Delete Title: () Change () Addition JOHNSON, WAYNE R Name: Name: Address: 7710 DRETWYLER DR Address:

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.

City-St-Zip:

SIGNATURE: STEPHEN H BATCHELDER D 03/04/2008

ORLANDO, FL 32821

City-St-Zip: