2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#731123

FILED May 09, 2006 Secretary of State

Entity Name: UPPER KEYS POST #10211 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

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

102255 OVERSEAS HWY KEY LARGO, FL 33037

Current Mailing Address: New Mailing Address:

PO BOX 1109 KEY LARGO, FL 33037

FEI Number: 23-7277248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LASKIS, ALEX
3 BOWEN DRIVE
KEY LARGO, FL 33037
US
JOHNSON, GARY
779 BOSTWICK DR
KEY LARGO, FL 33037

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: GARY JOHNSON 05/09/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 GOLDEN, NEAL
 Name:
 CARPENTER, LYNN

 Address:
 P.O. BOX 3252
 Address:
 101640 OVERSEAS HWY

 City-St-Zip:
 KEY LARGO, FL 33037
 City-St-Zip:
 KEY LARGO, FL 33037

Title: VD () Delete Title: VD (X) Change () Addition Name: JOHNSON, THOMAS Name: LASKIS, ALEX

 Address:
 419 COLLINS ST
 Address:
 3 BOWEN DR

 City-St-Zip:
 KEY LARGO, FL
 City-St-Zip:
 KEY LARGO, FL
 33037

Title: D () Delete Title: D (X) Change () Addition

Name: CASTILLO, ALFRED Name: HIGGINS, NORMAN Address: 8 GULFSTREAM DRIVE Address: PO BOX 672

City-St-Zip: KEY LARGO, FL City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MORTON, RICHARD
 Name:
 BRITT, PETER

 Address:
 4 DOLPHIN RD
 Address:
 101600 OVERSEAS HWY SP

 City-St-Zip:
 KEY LARGO, FL
 City-St-Zip:
 KEY LARGO, FL 33037

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: LYNN CARPENTER T 05/09/2006