

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732168

FILED
Mar 29, 2009
Secretary of State

Entity Name: GOLDEN GATE POST NO. 7721 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

800 NEFF'S WAY
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

800 NEFF'S WAY
NAPLES, FL 34119

New Mailing Address:

FEI Number: 23-7325333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GITTINGS, DALE A
2970 ORANGE GROVE TRAIL
NAPLES, FL 34120 US

Name and Address of New Registered Agent:

BALZARANO, RALPH J
781 14TH ST. SE
NAPLES, FL 34117 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: RALPH J BALZARANO

03/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PRITCHARD, NIEL
Address: 4838 SEVON CIRCLE.
City-St-Zip: NAPLES, FL 34112

Title: D () Delete
Name: JENKINS, DOYLE W
Address: 2500 JENKINS WAY
City-St-Zip: NAPLES, FL 34117

Title: D () Delete
Name: LEHMAN, EMMETT G
Address: 1050 25TH STREET SW
City-St-Zip: NAPLES, FL 34117

Title: D (X) Delete
Name: JOHN, MISCHUNG J
Address: 5477 CARLTON STREET
City-St-Zip: NAPLES, FL 34113

Title: D (X) Delete
Name: GITTINGS, DALE A
Address: 2970 ORANGE GROVE TRAIL
City-St-Zip: NAPLES, FL 34120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JENKINS, WAYNE
Address: 2500 JENKINS WAY
City-St-Zip: NAPLES, FL 34117

Title: D (X) Change () Addition
Name: MISCHUNG, JACK J
Address: 5477 CARLTON ST.
City-St-Zip: NAPLES, FL 34113

Title: D (X) Change () Addition
Name: BALZARANO, RALPH J
Address: 781 14TH ST. SE
City-St-Zip: NAPLES, FL 34117

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 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: RALPH J BALZARANO

QM

03/29/2009

Electronic Signature of Signing Officer or Director

Date