

**2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 04, 2010  
Secretary of State**

DOCUMENT# 733870

**Entity Name:** TOMMY G. FOSTER - POST NO. 4590, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

**Current Principal Place of Business:**

3709 E. ST. RD 92  
PLANT CITY, FL 33566 US

**New Principal Place of Business:**

**Current Mailing Address:**

VFW POST 4590 THOMAS G. FOSTER  
POST OFFICE BOX 1557  
PLANT CITY, FL 33564 US

**New Mailing Address:**

**FEI Number:** 59-6209820      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

POGUE, JAMES E  
111 N PARK RD  
PLANT CITY, FL 33563 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:** CMDR  
**Name:** AUSTIN, THOMAS  
**Address:** 5600 NEW TAMPA HWY  
**City-St-Zip:** LAKELAND, FL 33815

**Title:** TRES  
**Name:** RAYBURN, CLARENCE F  
**Address:** 715 SO. COLLINS ST  
**City-St-Zip:** PLANT CITY, FL 33565

**Title:** JV  
**Name:** GRAYSON, LAURA  
**Address:** 1406 SPENCER CT  
**City-St-Zip:** PLANT CITY, FL 33563

**Title:** QM  
**Name:** POGUE, JAMES F  
**Address:** 1111 N PARK RD  
**City-St-Zip:** PLANT CITY, FL 33563

I hereby 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 all other like empowered.

SIGNATURE: JAMES E. POGUE SR.

QM

01/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date