

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# 737228

Entity Name: RUSKIN MEMORIAL POST NO. 6287 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

5120 HWY US 41
VFW POST 6287
RUSKIN, FL 335723500 US

New Principal Place of Business:

Current Mailing Address:

5120 HWY US 41
VFW POST 6287
RUSKIN, FL 335723500 US

New Mailing Address:

FEI Number: 59-1596663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIPPERER, ANTHONY K
1520 33RD ST SE
RUSKIN, FL 33570 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: P () Delete
Name: SCHELLER, BRUCE
Address: 1028 APOLLO BEACH BLVD
City-St-Zip: APOLLO BEACH, FL 33572

Title: V () Delete
Name: YOHRMAN, GERALD
Address: 5120 US 41 N
City-St-Zip: RUSKIN, FL 335723500

Title: T () Delete
Name: HILTON, GEORGE
Address: 6229 FLORIDA CIR E
City-St-Zip: APOLLO BEACH, FL 33572

Title: TR () Delete
Name: HURLEY, WILLIAM
Address: 5120 US 41 N
City-St-Zip: RUSKIN, FL 33572

Title: TR () Delete
Name: STEELE, JOHN
Address: 5120 US 41 N
City-St-Zip: RUSKIN, FL 33572

Title: TR () Delete
Name: ZIPPERER, ANTHONY
Address: 5120 US 41 N
City-St-Zip: RUSKIN, FL 33572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHEEHY, THOMAS
Address: 5120 US HWY 41 NORTH
City-St-Zip: APOLLO BEACH, FL 33572

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

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

Title: TR (X) Change () Addition
Name: CLEGHORN, ROBERT
Address: 5120 US 41 N
City-St-Zip: RUSKIN, FL 33572

Title: TR (X) Change () Addition
Name: FULLER, ALBERT
Address: 5120 US 41 N
City-St-Zip: RUSKIN, FL 33572

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: THOMAS SHEEHY

PRES

01/13/2009

Electronic Signature of Signing Officer or Director

_____ Date