

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 28, 2009
Secretary of State

DOCUMENT# 744960

Entity Name: ARRANT SMITH POST NO. 4127 VETERANS OF FOREIGN WARS OF THE UNITED STATES INC.**Current Principal Place of Business:**601 N.E. 2ND. RD.
HOMESTEAD, FL 33030**New Principal Place of Business:****Current Mailing Address:**601 N.E. 2ND. RD.
HOMESTEAD, FL 33030**New Mailing Address:****FEI Number:** 59-1097344**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HANSON, VERNON D
601 NE 2ND RD.
HOMESTEAD, FL 33030 US**Name and Address of New Registered Agent:**BRUFORD, VINCENT A
601 NE 2ND RD.
HOMESTEAD, FL 33030 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: VINCENT A. BURFORD

09/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** CMDR () Delete
Name: STAHL, JOSEPH
Address: 2507 SAN REMO CIRCLE
City-St-Zip: HOMESTEAD, FL 33035**Title:** QM () Delete
Name: HANSON, VERNON D
Address: 616 SE 28TH LANE
City-St-Zip: HOMESTEAD, FL 33033**Title:** ADJ () Delete
Name: HANSON, VERNON D
Address: 601 SE 28TH LANE
City-St-Zip: HOMESTEAD, FL 33033**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** QM (X) Change () Addition
Name: BURFORD, VINCENT A
Address: 13704 SW 281ST
City-St-Zip: HOMESTEAD, FL 33033**Title:** ADJ (X) Change () Addition
Name: WONG, DAVINA S
Address: 1958 SE 24TH TERR
City-St-Zip: HOMESTEAD, FL 33035

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: VINCENT A. BURFORD

QM

09/28/2009

Electronic Signature of Signing Officer or Director

Date