

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2008 8:00 am
Secretary of State

01-23-2008 90011 028 ****70.00

DOCUMENT # 752229
 1. Entity Name
 V.F.W. POST NO. 3227, HOME ASSOCIATION



Principal Place of Business: 915 NEW YORK AVE, ST CLOUD, FL 34769-3361
 Mailing Address: 915 NEW YORK AVE, ST CLOUD, FL 34769-3361



01162008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-1861954 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HOWARD RUSSELL ADAMS, HOWE
 4315 SAULX CT 5280 ALLIGATOR LAKE RD
 SAINT CLOUD, FL 34772-34774

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8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: HOWE ADAMS *Howe Adams* DATE: 1-16-08

Filing Fee is \$61.25
 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CMD HOWARD RUSSELL ADAMS, HOWE 4315 SAULX CT 5280 ALLIGATOR LAKE RD. SAINT CLOUD, FL 34769 34774
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SRV HODGINS, CHARLES CONBOY, DAVID 12 WYOMING AVE 4949 SPIRAL WAY SAINT CLOUD, FL 34768 34771
TITLE NAME STREET ADDRESS CITY - ST - ZIP	QM MURPHY, JOHN F ZARAJCZYK, RONALD 1700 EASTERN AVE. 802 WYOMING AVE ST. CLOUD, FL 34769 34769
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ADJ ADAMS, HOWE NOT FILLED 5280 ALLIGATOR LAKE RD SAINT CLOUD, FL 34772
TITLE NAME STREET ADDRESS CITY - ST - ZIP	JV JARVIS, STEVE HAYES, JOHN ME 430 JERSEY AVE 301 TENNESSEE AVE SAINT CLOUD, FL 34769
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald Zarajczyk* RONALD ZARAJCZYK DATE: 1-16-2008 4079570291