## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 752974** 

FILED Feb 13, 2009 Secretary of State

Entity Name: MICCO POST 4425, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

**Current Principal Place of Business:** New Principal Place of Business: VFW POST 4425 VFW POST 4425 BAREFOOT BAY, FL 32976 915 HEMLOCK US BAREFOOT BAY, FL 32976 US **Current Mailing Address:** New Mailing Address: VFW POST 4425 VFW POST 4425 PO BOX 770-102 915 HEMLOCK BAREFOOT BAY, FL 32976 US BAREFOOT BAY, FL 32976 US FEI Number: 59-1905860 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BABECKI, ALFRED J 915 HEMLOCK ST BAREFOOT BAY, FL 32976 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DSVC () Delete () Change () Addition HEADY, RUSSELL Name: Name: 250 DOLPHIN CIR Address: Address: City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, JOSEPH S Name: Name: Address: 1209 MARIGOLD DR Address: City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: Title: () Delete Title: () Change () Addition BABECKI, ALFRED J Name: Name: Address: 915 HEMLOCK ST. Address: City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SMITH, RENE L Name: Address: 1003 ORIOLE CIR Address: City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: Title: DC ( ) Delete Title: () Change () Addition RAVORKIAN, JOHN Name: Name: 513 PAPAYA CIR Address: Address: City-St-Zip: BAREFOOT BAY, FL 32976 City-St-Zip: Title: () Delete Title: () Change () Addition BOLLINGER, HENRY Name: Name: Address: 1229 CALUSA DR Address: BAREFOOT BAY, FL 32976 City-St-Zip: 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: ALFRED J BABECKI QM 02/13/2009