

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763001

FILED
Mar 02, 2005
Secretary of State

Entity Name: DONALD A. ROSS POST NO. 9610 VETERANS OF FOREIGNGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

354 TENTH STREET
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

354 TENTH STREET
LAKE PARK, FL 33403

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCDERMOTT, JACK
354 TENTH STREET
LAKE PARK, FL 33403 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: PD () Delete
Name: MEARES, DON
Address: 354 TENTH STREET
City-St-Zip: WEST PALM BEACH, FL 33403

Title: VD () Delete
Name: KEENE, TOM
Address: 354 TENTH STREET
City-St-Zip: LAKE PARK, FL 33403

Title: TD () Delete
Name: MCDERMOTT, JACK
Address: 354 TENTH STREET
City-St-Zip: LAKE PARK, FL 33403

Title: SD () Delete
Name: MCDERMONT, JACK
Address: 354 TENTH STREET
City-St-Zip: LAKE PARK, FL 33403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: SD (X) Change () Addition
Name: MCDERMOTT, JACK
Address: 354 TENTH STREET
City-St-Zip: LAKE PARK, FL 33403

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACK MCDERMOTT

TD

03/02/2005

Electronic Signature of Signing Officer or Director

_____ Date