## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#763442**

FILED Jan 05, 2009 Secretary of State

Entity Name: USS TENNESSEE REUNION ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** USS TENNESSEE REUNION ASSOCINC. JACKSBORO, TN 37757 **Current Mailing Address: New Mailing Address:** USS TENNESSEE REUNION ASSOCINC. KAREN DAWSON JACKSBORO, TN 377557 US JACKSBORO, TN 37757 FEI Number: 22-2520950 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: RODGERS, JAMES 555 CROSŚ CREEK CIRCLE SEASTIAN, FL 32958 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: () Delete () Change () Addition WALTON, CLIFF Name: Name: 17965 JAYHAWK DR. Address: Address: City-St-Zip: PENN VALLLEY, CA 95946 US City-St-Zip: Title: DS () Delete Title: () Change () Addition DAWSON, KAREN Name: Name: Address: 249 CLOVER CIRCLE Address: City-St-Zip: JACKSBORO, TN 37757 US City-St-Zip: Title: () Delete Title: () Change () Addition DAWSON, KAREN Name: Name: Address: 249 CLOVER CIR Address: City-St-Zip: JACKSBORO, TN 37757 US City-St-Zip: Title: CD ( ) Delete Title: () Change () Addition Name: RICHARD, GEORGE Name: 111 COOPER HILL CT. BOX 85 Address: Address: City-St-Zip: GLEN HAVEN,, CO 80532 US City-St-Zip: Title: () Delete Title: () Change () Addition DUSSAULT, JOHN Name: Name: 17504 PLAZA GITAIN Address: Address: City-St-Zip: SAN DIEGO, CA 92128 City-St-Zip: Title: () Delete Title: () Change () Addition GALOW, RALPH W Name: Name: Address: 521 INMAN TERRACE Address: WILLOW GROVE, PA 19090 US 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: KAREN DAWSON SECR 01/05/2009