## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## **DOCUMENT#764543**

Oct 19, 2009 Secretary of State

Entity Name: SOUTH BROWARD POST NO. 8195, VETERANS OF FOREIGN WARS OF THE UNITED STATES,

INC

Current Principal Place of Business: New Principal Place of Business:

4414 PEMBROKE ROAD

WEST HOLLYWOOD, FL 330218106

Current Mailing Address: New Mailing Address:

4414 PEMBROKE ROAD

WEST HOLLYWOOD, FL 330218106

FEI Number: 59-6162551 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHANNON, DANIEL L 4414 PEMBROKE RD. HOLLYWOOD, FL 330218106 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: DANIEL L. SHANNON

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: COMM (X) Change ( ) Addition

 Name:
 SILER, WALTER
 Name:
 WHITE, ROBERT N.

 Address:
 4414 PEMBROKE RD.
 Address:
 4414 PEMBROKE RD.

 City-St-Zip:
 HOLLYWOOD, FL 330218106
 City-St-Zip:
 HOLLYWOOD, FL 330218106

Title: TQMD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 NELSON, VERNON
 Name:

 Address:
 4414 PEMBROKE ROAD
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:

Title: AD () Delete Title: () Change () Addition

 Name:
 ASHLEY, EDDIE L
 Name:

 Address:
 4414 PEMBROKE RD.
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 330218106
 City-St-Zip:

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SHARPLESS, MICHAEL A
 Name:

 Address:
 4414 PEMBROKE RD
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 330218106
 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: ROBERT N. WHITE COMM 10/19/2009