

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767842

FILED  
Feb 26, 2009  
Secretary of State

Entity Name: ARMY COUNTER INTELLIGENCE CORPS VETERANS, INC.

**Current Principal Place of Business:**

C/O MRS. URSULA AAMODT  
1491 PATRIOT DRIVE  
MELBOURNE, FL 329406819 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MRS. URSULA AAMODT  
1491 PATRIOT DRIVE  
MELBOURNE, FL 329406819 US

**New Mailing Address:**

FEI Number: 59-2285420      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

AAMODT, URSULA  
1491 PATRIOT DRIVE  
MELBOURNE, FL 329406819 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: CD      ( ) Delete  
Name: DOUGHERTY, MILLARD F  
Address: 107 CROFTLEY RD  
City-St-Zip: LUTHERVILLE TIMONIUM, MD 210935804

Title: P      ( ) Delete  
Name: BOYDEN, JAMES  
Address: 8194 KASTER DRIVE NW  
City-St-Zip: BREMERTON, WA 983114137

Title: VD      ( ) Delete  
Name: GELETA, LED  
Address: 6916 NORMAN AVE  
City-St-Zip: BALTIMORE, MD

Title: D      ( ) Delete  
Name: JUNE, JESSE  
Address: 101 PLAZA EAST BLVD., SUITE 230B6  
City-St-Zip: EVANSVILLE, IN 47715

Title: TD      ( ) Delete  
Name: SCHLENOFF, MICHAEL  
Address: 28 PARKWAY DR  
City-St-Zip: SYOSSET, NY 11791

Title: D      ( ) Delete  
Name: BURTON, ELLY  
Address: 10313 FOREST AVE  
City-St-Zip: FAIRFAX, VA 22030

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

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES BOYDEN

P

02/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date