

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768200

FILED
Mar 23, 2009
Secretary of State

Entity Name: MCCULLOUGH-MIXSON POST 4209, VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

4805 NE 36 AVE.
OCALA, FL 34479

New Principal Place of Business:

Current Mailing Address:

PO BOX 817
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-0618591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIKER, JAMES R
3323 NE 14TH. ST.
LOT C11
OCALA, FL 34470 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: MURGIA, CHARLES A
Address: 6997B ARDMORE
City-St-Zip: OCALA, FL 34472

Title: D () Delete
Name: KOHUT, THOMAS
Address: 2240 NE 42ND ST.
City-St-Zip: OCALA, FL 34479

Title: TD () Delete
Name: RIKER, JAMES R
Address: 3323 NE 14TH. ST. LOT C11
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: MCMANUS, LAWRENCE J
Address: PO BOX 850
City-St-Zip: ANTHONY, FL 32617

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:

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 R. RIKER

QM

03/23/2009

Electronic Signature of Signing Officer or Director

Date