2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2006
Secretary of State

DOCUMENT# 768889

Entity Name: AMVET POST 100 CHERRY BRANCH INC.

Current Principal Place of Business:

526 ORANGE AVENUE
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

Current Mailing Address:

526 ORANGE AVENUE
DAYTONA BEACH, FL 32114 US

New Mailing Address:

FEI Number: 59-1675253 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREEN, ROBERT L COMMAND
416 MARGIE LANE
DAYTONA BEACH, FL 32114 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:	O	( ) Delete
Name:	LAWTON, JAMES H	
Address:	526 ORANGE AVENUE	
City-St-Zip:	DAYTONA BEACH, FL 32114 US	
Title:	O	( ) Delete
Name:	GREEN, ROBERT	
Address:	416 MARGIE LANE	
City-St-Zip:	DAYTONA BEACH, FL 32114 US	
Title:	O	( ) Delete
Name:	BECKTON, KING D	
Address:	625 ORANGE AVENUE	
City-St-Zip:	DAYTONA BCH, FL 32114 US	
Title:	D	( ) Delete
Name:	ALBRITTON, WESLEY JR	
Address:	604 HUDSON ST.	
City-St-Zip:	DAYTONA BEACH, FL 32114 US	
Title:	O	( ) Delete
Name:	MITCHELL, WILLIE	
Address:	625 ORANGE AVENUE	
City-St-Zip:	DAYTONA BEACH, FL 32114 US	
Title:	D	( ) Delete
Name:	ROBINSON, WILLIAM	
Address:	28 PARK PLACE	
City-St-Zip:	ORMOND BEACH, FL 32174	

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 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: WILLIAM F. ROBINSON 0 01/04/2006

Electronic Signature of Signing Officer or Director — Date