

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 06, 2007
Secretary of State

DOCUMENT# 771308

Entity Name: JOHN C. GAINOUS POST NO. 10069 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.**Current Principal Place of Business:**1774 TROUT AVE
PORT ST. JOE, FL 32456 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 591
PORT ST JOE, FL 32457 US**New Mailing Address:****FEI Number:** 59-1863143**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HANSON, JACK R.A.
6394 DOC WHITFIELD RD
WEWAHITCHKA, FL 32465 US**Name and Address of New Registered Agent:**TAYLOR, WAYNE L COMMAND
6394 DOC WHITFIELD RD
WEWAHITCHKA, FL 32465 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: WAYNE L. TAYLOR

06/06/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** CDR () Delete
Name: TAYLOR, WAYNE L COMMAND
Address: 6394 DOC WHITFIELD RD
City-St-Zip: WEWAHITCHKA, FL 32465**Title:** ADJ () Delete
Name: RAY, ROBERT L ADJUTAN
Address: 7272 GEORGIA AVE
City-St-Zip: PORT ST JOE, FL 32456**Title:** QM () Delete
Name: PAUL, HARRY L QTRMAST
Address: 183 S. SEMINOLE STREET
City-St-Zip: PORT ST. JOE, FL 32456**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:

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: WAYNE L. TAYLOR

CDR

06/06/2007

Electronic Signature of Signing Officer or Director

Date