## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#771308** 

FILED Apr 30, 2008 Secretary of State

Entity Name: JOHN C. GAINOUS POST NO. 10069 VETERANS OF FOREIGN WARS OF THE UNITED STATES,

INC

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

1774 TROUT AVE

PORT ST. JOE, FL 32456 US

Current Mailing Address: New Mailing Address:

PO BOX 591

PORT ST JOE, FL 32457 US

FEI Number: 59-1863143 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TAYLOR, WAYNE L COMMAND
6394 DOC WHITFIELD RD
319 ROBIN LN
MEXICO PERCENTION

WEWAHITCHKA, FL 32465 US MEXICO BEACH, FL 32410 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: SHARON P. H. LAPLANTE 04/30/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 CDR
 ( ) Delete
 Title:
 CDR
 (X) Change ( ) Addition

 Name:
 TAYLOR, WAYNE L COMMAND
 Name:
 LAPLANTE, SHARON P COMMAND

 Address:
 6394 DOC WHITFIELD RD
 Address:
 P.O. BOX 13683

City-St-Zip: WEWAHITCHKA, FL 32465 City-St-Zip: MEXICO BEACH, FL 32410

Title: ADJ ( ) Delete Title: ADJ (X) Change ( ) Addition

Name: RAY, ROBERT L ADJUTAN Name: ARMSTRONG, RICHARD J ADJUTAN
Address: 7272 GEORGIA AVE Address: 9412 COCKLES AVE

City-St-Zip: PORT ST JOE, FL 32456 City-St-Zip: PORT ST JOE, FL 32456

Title: QM () Delete Title: () Change () Addition Name: PAUL, HARRY L QTRMAST Name:

 Name:
 PAUL, HARRY L QTRMAST
 Name:

 Address:
 183 S. SEMINOLE STREET
 Address:

 City-St-Zip:
 PORT ST. JOE, FL 32456
 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: SHARON P. H. LAPLANTE COMM 04/30/2008