

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002814

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** ARMED FORCES VETERANS HOMES FOUNDATION, INC.

**Current Principal Place of Business:**

5211 AUTH ROAD  
SUITLAND, MD 20746

**New Principal Place of Business:**

**Current Mailing Address:**

5211 AUTH ROAD  
SUITLAND, MD 20746

**New Mailing Address:**

**FEI Number:** 52-1993760

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, STE 4  
WESTON, FL 33331 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: D ( ) Delete  
Name: STATON, JAMES D  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

Title: P ( ) Delete  
Name: FULMER, KENNETH A  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

Title: D ( ) Delete  
Name: DEAN, RICHARD M  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

Title: D ( ) Delete  
Name: BROWN-JOHNSON, HAZEL W  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

Title: EXD ( ) Delete  
Name: MALEBRANCHE, KAREN T  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

Title: FCO ( ) Delete  
Name: MATHER, M D, JOHN M  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: C (X) Change ( ) Addition  
Name: STATON, JAMES D  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

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

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

Title: ST (X) Change ( ) Addition  
Name: DRISKILL, PHILLIP L  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

Title: D (X) Change ( ) Addition  
Name: PARISH, SAM E  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

Title: D (X) Change ( ) Addition  
Name: MATHER, M D, JOHN M  
Address: 5211 AUTH ROAD  
City-St-Zip: SUITLAND, MD 20746

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: PHILLIP L. DRISKILL

ST

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date