


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2008 08:00 AM
Secretary of State

DOCUMENT # N00000001652 1. Entity Name FORT WALTON BEACH CHAPTER #175, THE MILITARY ORDER OF THE WORLD WARS, INCORPORATED	
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Principal Place of Business 6 FOREST GROVE PL FORT WALTON BEACH, FL 32548	Mailing Address 6 FOREST GROVE PL FORT WALTON BEACH, FL 32548
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01032008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2202135	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CAHOON, JOHN E JR 6 FOREST GROVE PL FORT WALTON BEACH, FL 32548
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000789825 01/23/08-80009-010 70.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JOHNSON, LEON P 63 LINWOOD RD FORT WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAHOON, JOHN E JR 6 FOREST GROVE PL FT WALTON BEACH, FL 325486354
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONNORS, JOHN S 70 LINWOOD RD FT WALTON BEACH, FL 325471617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  JOHN E CAHOON JR	1-15-08	850-862-5078
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>