## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000001016

Entity Name: AMERICAN VETERANS POST 2000 INC.

FILED Apr 06, 2009 Secretary of State

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

401 ORTIZ BLVD 401 ORTIZ BLVD

WARM MINERAL SPRINGS, FL 34287 N/A

WARM MINERAL SPRINGS, FL 34287

Current Mailing Address: New Mailing Address:

401 ORTIZ BLVD 401 ORTIZ BLVD

WARM MINERAL SPRINGS, FL 34287 N/A

WARM MINERAL SPRINGS, FL 34287

FEI Number: 65-1003686 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:

WRIGHT, SANDRA M DC REYNOLDS, ALONZO C 4890 LA ROSA AVENUE 5330 SIMRAK ST

NORTH PORT, FL 34286 US NORTH PORT, FL 34287 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: ALONZO C. REYNOLDS 04/06/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: DC ( ) Delete Title: DC (X) Change ( ) Addition

Name: WRIGHT, SANDRA Name: REYNOLDS, ALONZO C
Address: 4890 LA ROSA AVENUE Address: 5330 SIMRAK ST

City-St-Zip: NORTH PORT, FL 342876 City-St-Zip: NORTH PORT, FL 34287 US

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

 Name:
 REYNOLDS, ALONZO
 Name:
 WRIGHT, SANDRA

 Address:
 5330 SIMRAK STREET
 Address:
 4890 LAROSA

City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: NORTH PORT, FL 34285 US

Title: DJA () Delete Title: DJA (X) Change () Addition
Name: LUSK, RICHARD Name: LUSK, RICHARD

 Name:
 LUSK, RICHARD
 Name:
 LUSK, RICHARD

 Address:
 615 YALE ROAD
 615 YALE ROAD
 615 YALE ROAD

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 VENICE, FL 34293 US

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

 Name:
 IVES, HERBERT
 Name:
 IVES, HERBERT

 Address:
 6351 LABREA STREET
 Address:
 6351 LABREA STREET

 City-St-Zip:
 NORTH PORT, FL 34287
 City-St-Zip:
 NORTH PORT, FL 34287 US

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

Name: CALLEGARI, SALVATORE Name: STARK, JOSEPH
Address: 145 BERMUDA WAY Address: 108 ANTILLA RD

City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: NORTH PORT, FL 34287 US

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

 Name:
 VARDELL, RÖBERT
 Name:
 WRIGHT, JAMES R

 Address:
 4063 FONSICA AVENUE
 Address:
 4890 LAROSA RD

City-St-Zip: NORTH PORT, FL 34286 City-St-Zip: NORTH PORT, FL 34287 US

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: ALONZO C. REYNOLDS DC 04/06/2009

Electronic Signature of Signing Officer or Director

Date