## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000004259

Entity Name: AMVETS POST 911, INC.

FILED Apr 07, 2012 Secretary of State

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

5624 S. RIDGEWOOD AVE PORT ORANGE, FL 32127

Current Mailing Address: New Mailing Address:

5624 S. RIDGEWOOD AVE PORT ORANGE, FL 32127

FEI Number: 47-0856352 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:

DEGEN, DONALD 5277 S. RIDGEWOOD AVE # 48 PORT ORANGE, FL 32127 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: C

Name: THOMPSON, DOUG
Address: 5624 S. RIDGEWOOD AVE
City-St-Zip: PORT ORANGE, FL 32127

Title: 1VC

 Name:
 DAVIDSON, LUTHER

 Address:
 5624 S. RIDGEWOOD AVE

 City-St-Zip:
 PORT ORANGE, FL 32127

Title: DF

 Name:
 DEGEN, DONALD

 Address:
 5624 S. RIDGEWOOD AVE

 City-St-Zip:
 PORT ORANGE, FL 32127

Title: JA

Name: BOWMAN, LARRY

Address: 5624 S. RIDGEWOOD AVE City-St-Zip: PORT ORANGE, FL 32127

Title: PM

Name: TAYLOR, LARRY

Address: 5624 S. RIDGEWOOD AVE City-St-Zip: PORT ORANGE, FL 32127

Title: ADJ

Name: BERNARDINI, RICK
Address: 5624 S. RIDGEWOOD AVE
City-St-Zip: PORT ORANGE, FL 32127

I hereby 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 all other like empowered.

SIGNATURE: DONALD DEGEN DF 04/07/2012