

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007336

FILED
Apr 16, 2011
Secretary of State

Entity Name: AMERICAN VETERANS DIVISION, NSCC, INC.

Current Principal Place of Business:

11369 OKEECHOBEE BLVD.
SUITE 200
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 207
LOXAHATCHEE, FL 33470

New Mailing Address:

FEI Number: 01-0621613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, ANTHONY
11369 OKEECHOBEE BLVD
SUITE 200
ROYAL PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

RAMIREZ, ANTHONY A
11369 OKEECHOBEE BLVD
SUITE 200
ROYAL PALM BEACH, FL 33411 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: ANTHONY A. RAMIREZ

04/16/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: RAMIREZ, ANTHONY
Address: P.O. BOX 207
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP
Name: LAWRENCE, RICHARD
Address: P.O. BOX 207
City-St-Zip: LOXAHATCHEE, FL 33470

Title: T
Name: RAMIREZ, ANTHONY
Address: P.O. BOX 207
City-St-Zip: LOXAHATCHEE, FL 33470

Title: S
Name: ESPINOZA, CHARLENE
Address: P.O. BOX 207
City-St-Zip: LOXAHATCHEE, FL 33470

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: ANTHONY A. RAMIREZ

P

04/16/2011

Electronic Signature of Signing Officer or Director

Date