2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004925

FILED Jul 04, 2008 Secretary of State

Entity Name: PFC SAMUEL R. WALL, MCL DETACHMENT 1139, INC.

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

DAV 70 1039 N. PAUL DR INVERNESS, FL 34450 U.

Current Mailing Address: New Mailing Address:

P.O. BOX 2773 INVERNESS, FL 34451

FEI Number: 20-0036226 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SMITH, ROSLYN 6724 EAST GLENCOE ST INVERNESS, FL 34452 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 HERON, THOMAS J
 Name:
 SPOTO, JOSEPH

 Address:
 10965 S TURNER AVE
 Address:
 1870 W. TALL OAKS DR.

 City-St-Zip:
 FLORAL CITY, FL 34436
 City-St-Zip:
 BRVERLY HILLS, FL 34465

Title: SRV () Delete Title: (X) Change () Addition SPOTO, JOSEPH Name: TAGGART, LAWRENCE L Name: Address: 1870 W. TALL OAKS DR Address: 7565 E. STAGECOACH TRAIL City-St-Zip: BEVERLY HILLS, FL 34465 City-St-Zip: FLORAL CITY, FL 34436

Title: JRV () Delete Title: JRV (X) Change () Addition
Name: TAGGART, LAWERENCE Name: SMITH, CHARLES W

Address: 7565 E STAGE COACH TRAIL

Address: 7565 E STAGE COACH TRAIL

City-St-Zip: FLORAL CITY, FL 34436

Address: 7565 E STAGE COACH TRAIL

City-St-Zip: FLORAL CITY, FL 34436

City-St-Zip: FLORAL CITY, FL 34436

Title: PHST () Delete Title: PYMS (X) Change () Addition Name: SMITHR, ROSLYN Name: SMITHR, ROSLYN

 Name:
 SMITHR, ROSLYN
 Name:
 SMITHR, ROSLYN

 Address:
 6724 GLENCOE ST
 Address:
 6724 GLENCOE ST

 City-St-Zip:
 INVERNESS, FL 344527128
 City-St-Zip:
 INVERNESS, FL 344527128

City-St-Zip: INVERNESS, FL 344527128 City-St-Zip: INVERNESS, FL 344527128

Title: JA () Delete Title: JA (X) Change () Addition Name: CECIL, JOAN Name: HERON, THOMAS J

Address: 5248 SOUTH VENTI TERRACE Address: 10965 S. TURNER AVE.
City-St-Zip: INVERNESS, FL 34452 City-St-Zip: FLORAL CITY, FL 34436

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

 Name:
 Name:
 HERON, SUSAN

 Address:
 Address:
 10965 S. TURNER AVE.

 City-St-Zip:
 City-St-Zip:
 FLORAL CITY, FL 34436

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: ROSLYN SMITH PYMS 07/04/2008