

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# N03334

Entity Name: GREEN COVE SPRINGS POST NO. 1988 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

421 S ORANGE AVE
P.O. BOX 883
GREEN COVE SPRINGS, FL 32043 US

New Principal Place of Business:

421 S ORANGE AVE
GREEN COVE SPRINGS, FL 32043 US

Current Mailing Address:

421 S ORANGE AVE
P.O. BOX 883
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

PO BOX 883
GREEN COVE SPRINGS, FL 32043

FEI Number: 59-6162480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWDEN, CLAYTON T
421 S ORANGE AVE
GREEN COVE SPRINGS, FL 32043 US

Name and Address of New Registered Agent:

MANNING, ROGER L
421 S ORANGE AVE
GREEN COVE SPRINGS, FL 32043 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: ROGER L MANNING

02/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: COMM () Delete
Name: GUEST, JIM
Address: 421 S. ORANGE AVE.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: SRVC () Delete
Name: NAVARRO, MANUEL
Address: 421 S. ORANGE AVE.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: JRVC () Delete
Name: MINTON, RON
Address: 421 S. ORANGE AVE
City-St-Zip: GREEN COVE SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COMM (X) Change () Addition
Name: ARROYO, VICTOR M
Address: 421 S. ORANGE AVE.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: SRVC (X) Change () Addition
Name: MINTON, RONALD M
Address: 421 S. ORANGE AVE.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: JRVC (X) Change () Addition
Name: COLLINS, ROBERT D
Address: 421 S. ORANGE AVE
City-St-Zip: GREEN COVE SPRINGS, FL

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: ROGER L MANNING

QM

02/19/2009

Electronic Signature of Signing Officer or Director

Date