

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004940

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** THE 35TH INFANTRY (CACTI) REGIMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

1736 S.W 2ND ST  
FORT LAUDERDALE, FL 33312

**New Principal Place of Business:**

**Current Mailing Address:**

455 COUNTY RD. 177  
KILLEN, AL 35645

**New Mailing Address:**

**FEI Number:** 27-0091566      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KURTGIS, MICHAEL P  
1736 S.W. 2ND ST  
FORT LAUDERDALE, FL 33312      US

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

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: P      ( ) Delete  
Name: HALL, JAMES K  
Address: 1355 N. BOROARD ST  
City-St-Zip: WOODBURY, NJ 08096 US

Title: T      ( ) Delete  
Name: BROWN, CHARLES W  
Address: 455 COUNTY RD. 177  
City-St-Zip: KILLEN, AL 35645

Title: S      ( ) Delete  
Name: HENSON, WILLIAM H  
Address: 3680 CHRISFIELD DR  
City-St-Zip: ROCKY RIVER, OH 44116

Title: VP      ( ) Delete  
Name: ANDERSON, JIM  
Address: 4719 MT BAKER LP  
City-St-Zip: MOUNT VERNON, WA 98273

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES W. BROWN

TREA

01/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date