

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006327

FILED
Mar 31, 2009
Secretary of State

Entity Name: MID FLORIDA KOREAN WAR VETERANS ASSOCIATION, INC.

Current Principal Place of Business:

1000 WINDERLEY PLACE
SUITE 240
MAITLAND, FL 327514118 US

New Principal Place of Business:

Current Mailing Address:

1000 WINDERLY PLACE
SUITE 240
MAITLAND, FL 327514118 US

New Mailing Address:

FEI Number: 61-1472677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSSELL, WILLIAM C
1000 WINDERLY PLACE
SUITE 240
MAITLAND, FL 327514118 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: ROBERTS, THOMAS
Address: 2365 FLAMINGO WAY
City-St-Zip: WINTER PARK, FL 327921619 US

Title: V () Delete
Name: TRAVERS, CHARLES
Address: 333 LOS ALTOS WAY APT 104
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: S () Delete
Name: RUSSELL, WILLIAM C
Address: 1000 WINDERLY PLACE SUITE 240
City-St-Zip: MAITLAND, FL 327514118 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TRAVERS, CHARLES R
Address: 333 LOS ALTOS WAY #104
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: V (X) Change () Addition
Name: STANLEY, KALMOWITZ VP
Address: 1944 CENTRAL PARK AVE
City-St-Zip: ORLANDO, FL 328078448 US

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

Title: T () Change (X) Addition
Name: JOHNSON, ROBERT D TREASUE
Address: 504 DEW DROP COVE
City-St-Zip: CASSELBERRY, FL 327074804 US

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: ROBERT D JOHNSON

TRSU

03/31/2009

Electronic Signature of Signing Officer or Director

Date