2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Nov 07, 2008 DOCUMENT# N04844 Secretary of State

Entity Name: GILLEY, LONG, OSTEEN POST NO. 8698 VETERANS OF FOREIGN WARS OF THE UNITED

STATES, INC.

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

520 E HWY 40 INGLIS, FL 34449

Current Mailing Address: New Mailing Address:

P.O. BOX 241 INGLIS, FL 34449

FEI Number: 51-0226015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FIZZ, ELMER GILBERT, ALTON G 132 GADDYS AV 8130 SE 153D ST INGLIS INGLIS, FL 34449 US INGLIS, FL 34449

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: ALTON G GILBERT 11/07/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FIZZ, ELMER K ALTON, GILBERT G Name: Name:

Address: 8130 SE 153RD ST Address: 8130 SE 153RD ST City-St-Zip: INGLIS, FL 34449 City-St-Zip: INGLIS, FL 34449 L

Title: Title: (X) Change () Addition () Delete TORRES, JOE C Name: GIBERT, TONY Name:

Address: 132 GLADYS AVE Address: 44 SAPP ST City-St-Zip: INGLIS, FL 34449 City-St-Zip: INGLIS, FL 34449 L

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

ADDISON, DAVID S Name: Name: 272 GLADYS AVE Address: Address: City-St-Zip: INGLIS, FL 34449 City-St-Zip:

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

TORRES, JOE Name: Name: 44 SAPP ST Address: Address: City-St-Zip: INGLIS, FL 34449 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: JOE C TORRES D 11/07/2008