

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009914

FILED
Apr 18, 2007
Secretary of State

Entity Name: UNITED STATES MILITARY CHARITABLE SUPPORT FOUNDATION, INC.

Current Principal Place of Business:

4803 BONANZA RD
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

4803 BONANZA RD
LAKE WORTH, FL 33467

New Mailing Address:

FEI Number: 20-3443343

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PALMER, PATTY
4803 BONANZA RD
LAKE WORTH, FL 33467 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: DP () Delete
Name: PALMER, PATTY
Address: 4803 BONANZA RD
City-St-Zip: LAKE WORTH, FL 33467

Title: DS () Delete
Name: BUTLER, FRANK
Address: 115 VAN GOGH WAY ROYAL
City-St-Zip: PALM BCH, FL 33411

Title: DV () Delete
Name: SPARKS, TIM
Address: 1910 CAPESEIDE CIR
City-St-Zip: WELLINGTON, FL 33467

Title: D () Delete
Name: FONTAIN, JOHN
Address: 2701 NE 42ND ST
City-St-Zip: LIGHTHOUSE PT, FL 33064

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 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: PATTY PALMER

DP

04/18/2007

Electronic Signature of Signing Officer or Director

Date