2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009914

FILED Apr 09, 2008 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 4803 BONANZA RD 6416 BARTON CREEK CIRCLE LAKE WORTH, FL 33467 LAKE WORTH, FL 33463 **Current Mailing Address: New Mailing Address:** 4803 BONANZA RD 6416 BARTON CREEK CIRCLE LAKE WORTH, FL 33467 LAKE WORTH, FL 33463 FEI Number: 20-3443343 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: PALMER, PATTY PALMER, PATTY 6416 BARTON CREEK CIRCLE 4803 BONANZA RD LAKE WORTH, FL 33467 US LAKE WORTH, FL 33463 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: 04/09/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition PALMER, PATTY PALMER, PATTY Name: Name: 4803 BONANZA RD Address: 6416 BARTON CREEK CIRCLE Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33463 Title: DS () Delete Title: (X) Change () Addition BUTLER, FRANK Name: BUTLER, FRANK Name: Address: 115 VAN GOGH WAY ROYAL Address: 115 VAN GOGH WAY ROYAL City-St-Zip: PALM BCH, FL 33411 City-St-Zip: PALM BCH, FL 33411 Title: DV () Delete Title: () Change () Addition SPARKS, TIM Name: Name: 1910 CAPESIDE CIR Address: Address: City-St-Zip: WELLINGTON, FL 33467 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FONTAIN, JOHN Name: Address: 2701 NE 42ND ST Address: City-St-Zip: LIGHTHOUSE PT, FL 33064 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: PATTY PALMER DP 04/09/2008