

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011490

FILED
Apr 22, 2008
Secretary of State

Entity Name: THE CONSTITUTION COMMITTEE OF THE UNITED STATES, INC.

Current Principal Place of Business:

809 NORTH "O" STREET
LAKE WORTH, FL 33460 US

New Principal Place of Business:

809 NORTH
LAKE WORTH, FL 33460 US

Current Mailing Address:

809 N
LAKE WORTH, FL 33460 US

New Mailing Address:

809 NORTH
LAKE WORTH, FL 33460 US

FEI Number: 20-3792358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, DAVID A
809 NORTH "O" STREET
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

WOOD, DAVID A
809 NORTH
LAKE WORTH, FL 33460 US

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: DAVID A. WOOD

04/22/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: TAFFEL, DEAN G
Address: 139 LAKE MERYL DRIVE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: VP/D () Delete
Name: WOOD, DAVID A
Address: 809 NORTH
City-St-Zip: LAKE WORTH, FL 33460 US

Title: T/D () Delete
Name: GORMAN, WILLIAM P
Address: 2936 LAKESHORE DRIVE, #403
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D () Delete
Name: SUSCO, BARBARA G
Address: 7164 ST. ANDREWS ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: EARLEY, JOHN M
Address: P.O. BOX 31
City-St-Zip: LOXAHATCHEE, FL 33470

Title: D () Delete
Name: COLEMAN, LEE
Address: 3061 DONNELLY DRIVE
City-St-Zip: LANTANA, FL 33462

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: S/1D (X) Change () Addition
Name: SUSCO, BARBARA G
Address: 7164 ST. ANDREWS ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Change () Addition
Name: EARLEY, JOHN M
Address: 1588 ARABIAN DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

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: WILLIAM P. GORMAN

D/T

04/22/2008

Electronic Signature of Signing Officer or Director

Date