2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06811

FILED Jan 12, 2009 Secretary of State

Entity Name: SOUTH FLORIDA CHAPTER 82ND AIRBORNE DIVISION ASSOCIATION, INC.

	rincipal Place of Business:	New Principal Place	New Principal Place of Business:	
	93RD AVE CITY, FL 33326 US			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
	DEN DRIVE CITY, FL 33026 US			
FEI Number	: 59-2525964 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:	
5115 SW 9	L, ANTHONY 93RD AVE JDERDALE, FL 33326 US			
	e named entity submits this statement for the e of Florida.	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:Electronic Signature of Registered A	zont	Data	
OFFICER	S AND DIRECTORS:		Date SES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete WEINSOFF, IRVING 600 NW 36TH STREET MIAMI, FL 33317	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	PC () Delete PEREZ-ORTIZ, JOSE 1500 NW 12TH AVE #1305	Title: Name: Address:	() Change () Addition	
City-St-Zip:	MIAMI, FL 33136	City-St-Zip:		
Title: Name: Address:	MIAMI, FL 33136 SR () Delete BUFFINGTON, ROBERT L 2765 GARDEN DR COOPER CITY, FL 33026	City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition	
City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	SR () Delete BUFFINGTON, ROBERT L 2765 GARDEN DR	Title: Name: Address:	() Change () Addition () Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	SR () Delete BUFFINGTON, ROBERT L 2765 GARDEN DR COOPER CITY, FL 33026 V () Delete ALTOBELL, ANTHONY 5115 SW 93 AVE	Title: Name: Address: City-St-Zip: Title: Name: Address:		

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 L. BUFFINGTON SR 01/12/2009