2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001935

Entity Name: AMVETS POST 2006, INC.

FILED Apr 30, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

LEESBURG, FL 34788

(X) Change () Addition

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

28944 HUBBARD ST 2219 CITRUS BOULEVARD LOT #112 LEESBURG, FL 34748-301

LEESBURG, FL 34748

New Mailing Address: Current Mailing Address:

2219 CITRUS BOULEVARD PO BOX 490585 LEESBURG, FL 347490585 LEESBURG, FL 34748-301

FEI Number: 11-3787972 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

COBERLEY, WM J MADRID, FILADELFIO C 11802 OCKLAWAHA DR 28944 HUBBARD ST LEESBURG, FL 34788 US LOT #112 LEESBURG, FL 34748 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.

City-St-Zip:

SIGNATURE: FILADELFIO C. MADRID 04/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name:

() Delete COBERLEY, WM J CMDR. MADRID, FILADELFIO C CMDR. Name: 28944 HUBBARD ST, LOT #112 Address: 11802 OCKLAWAHA DR

Address: City-St-Zip: LEESBURG, FL 34748

Title: Title: (X) Change () Addition () Delete Name: MAY, WILLIAM M VCMDR. Name: EDSON, RICHARD R VCMDR. Address: 904 BEAVER RUN Address: 99 SIESTA DR

City-St-Zip: TAVARES, FL 32778 City-St-Zip: LEESBURG, FL 32778

Title: () Delete Title: (X) Change () Addition EDSON, RICHARD R FO

Name: ROSE, BOBBY E FO Name: Address: 99 SIESTA DRIVE Address: 950 MARK RD City-St-Zip: LEESBURG, FL 34748 City-St-Zip: LEESBURG, FL 34748

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: FILADELFIO C. MADRID DIR 04/30/2008