

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010729

FILED
Mar 15, 2009
Secretary of State

Entity Name: AMERICAN VETERANS OF BROWARD COUNTY, INC.

Current Principal Place of Business:

2450 NE 51ST STREET #11
FORT LAUDERDALE, FL 333084021

New Principal Place of Business:

Current Mailing Address:

2450 NE 51ST STREET #11
FORT LAUDERDALE, FL 333084021

New Mailing Address:

FEI Number: 26-1377521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONUSO, FRANK N
2450 NE 51ST STREET #11
FORT LAUDERDALE, FL 333084021 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: CD () Delete
Name: BONUSO, FRANK N
Address: 2450 NE 51ST STREET #11
City-St-Zip: FORT LAUDERDALE, FL 333084021

Title: VCD () Delete
Name: HANSEN, GORM DR
Address: 4050 NE 31 AVENUE
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: SD () Delete
Name: CALIENDO, SAM ESQ
Address: P.O. BOX 50041
City-St-Zip: LIGHTHOUSE POINT, FL 330744021

Title: TD () Delete
Name: JETER, FRANK
Address: 712 NE 13 COURT #4
City-St-Zip: FORT LAUDERDALE, FL 333014021

Title: D (X) Delete
Name: BIEBER, HARRY P
Address: P.O. BOX 030458
City-St-Zip: FORT LAUDERDALE, FL 33303

Title: D (X) Delete
Name: DAY, LARRY
Address: 3100 N. OCEAN BLVD #2808
City-St-Zip: FORT LAUDERDALE, FL 33305

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
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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 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: FRANK N. BONUSO

CD

03/15/2009

Electronic Signature of Signing Officer or Director

Date