# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 06, 2008**
**Secretary of State**

DOCUMENT# N09012

**Entity Name:** MASSEY-PETREY, POST NO. 4285 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

**Current Principal Place of Business:**

1001 INGRAHAM AVENUE
HAINES CITY, FL 33844

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2204
HAINES CITY, FL 338449219

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

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

JENNINGS, CHARLES R.
190 TRINITY CIR
HAINES CITY, FL 33844 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: T ( ) Delete
Name: BACON, HAROLD L
Address: 904 S 15TH ST
City-St-Zip: HAINES CITY, FL

Title: D ( ) Delete
Name: JENNINGS, CHARLES R.,
Address: 190 TRINITY CIR
City-St-Zip: HAINES CITY, FL 33844

Title: T ( ) Delete
Name: DUNCAN, DEWER
Address: 3615 CR 547 N
City-St-Zip: DAVENPORT, FL 33837

Title: T ( ) Delete
Name: HATTAWAY, HERBERT
Address: 113 C STREET
City-St-Zip: HAINES CITY, FL 33844

**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
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: CHARLES R. JENNINGS MR. 05/06/2008
Electronic Signature of Signing Officer or Director — Date