

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000005842

**FILED**  
**Mar 03, 2011**  
**Secretary of State**

**Entity Name:** GAINES & MORGAN AMVETS POST #17, INC.

**Current Principal Place of Business:**

1893 WEST 18TH STREET  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 4361  
SANFORD, FL 32772

**New Mailing Address:**

**FEI Number:** 59-2797129

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELTON, JAMES E SR.  
1893 WEST 18TH STREET  
SANFORD, FL 32771 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:** D  
**Name:** MELTON, JAMES E SR.  
**Address:** POST OFFICE BOX 4361  
**City-St-Zip:** SANFORD, FL 32772

**Title:** D  
**Name:** CUMMINGS, ROOSEVELT JR.  
**Address:** 1606 EAST 20TH STREET  
**City-St-Zip:** SANFORD, FL 32771

**Title:** D  
**Name:** JACKSON, ALFRED  
**Address:** 415 BAY AVENUE  
**City-St-Zip:** SANFORD, FL 32771

**Title:** D  
**Name:** FORD, CLARENCE  
**Address:** 1832 COOLIDGE AVENUE  
**City-St-Zip:** SANFORD, FL 32771

**Title:** D  
**Name:** JENKINS, ALTON  
**Address:** 3654 MAIN STREET  
**City-St-Zip:** SANFORD, FL 32771

I hereby 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 all other like empowered.

**SIGNATURE:** JAMES E MELTON SR.

D

03/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date