2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# N11108

Entity Name: AMVETS POST 15 OF FLORIDA, INC.

Current Principal Place of Business:

AMVETS POST 15
2024 SOUTH US 1
FT. PIERCE, FL 34950 US

New Principal Place of Business:

Current Mailing Address:

2024 SOUTH US 1
FT. PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 59-2502517 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALERNO, EUGENE J
298 NW BILTMORE ST
PORT SAINT LUCIE, FL 34983 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: LEVAY, WILLIAM J
Address: 102 GARDEN AVE
City-St-Zip: FORT PIERCE, FL 34982

Title: P ( ) Delete
Name: SAMMONS, MARVIN
Address: 199 RIVER PALM DR
City-St-Zip: FORT PIERCE, FL 34946

Title: VC ( ) Delete
Name: MCROON, MICHEAL
Address: 123 7TH STREET
City-St-Zip: FORT PIERCE, FL

Title: FO ( ) Delete
Name: SALERNO, EUGENE T
Address: 298 NW 131 BILTMORE ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: CM (X) Change ( ) Addition
Name: OWENS, JAMES
Address: 2024 S US1
City-St-Zip: FORT PIERCE, FL 34950

Title: FO (X) Change ( ) Addition
Name: SALERNO, EUGENE J
Address: 298 NW 131 BILTMORE ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

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: EUGENE J SALERNO FO 02/02/2009

Electronic Signature of Signing Officer or Director — Date