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Feb 27, 1999 8:00 am  
Secretary of State

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<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>				FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # N12289</b>					
1. Corporation Name <b>AMERICAN EX PRISONERS OF WAR DEPARTMENT OF FLORIDA, INC.</b>					
Principal Place of Business 6451 BRIGHT RD N FT MYERS FL 33917 US			Mailing Address 6451 BRIGHT RD N FT MYERS FL 33917 US		



2. Principal Place of Business 21 <b>1008 S. San Remo Av.</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>1008 S. San Remo Av.</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>11/26/1985</b>	
22 City & State <b>Clearwater Fla.</b>		27 City & State <b>Clearwater Fla.</b>		4. FEI Number <b>59-2445954</b>	
23 Zip <b>33756</b>		28 Country <b>U.S.</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24 <b>33756</b>		25 <b>U.S.</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	

9. Name and Address of Current Registered Agent <b>RICCIARDI, ABBIE W</b> <b>6451 BRIGHT RD</b> <b>N FT MYERS FL 33917</b>				10. Name and Address of New Registered Agent 81 Name <b>Jean E. Billig</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>1008 S. San Remo Av.</b> 83 84 City <b>Clearwater</b> <b>FL</b> 85 Zip Code <b>33756</b>			
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Jean E. Billig Jean E. Billig 1-20-99  
Signature, typed or printed name of registered agent and if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	D	WELLS, WILLIAM A	137 MAPLE LANE LAKE HELEN FL 32744				
	T	RICCIARDS, ABBIE W	6451 BRIGHT RD N FT MYERS FL 33917	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	S	ANDERSON, DORIS	2189 BARRY DR. FT. MYERS FL 33907	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
	D	KLEIN, JOSEPH	14803 CORTLAND DRIVE HUDSON FL 34667	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
				5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
				6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jean E. Billig 1-20-99 (272) 441-2922  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)