

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2009
Secretary of State

DOCUMENT# N14633

Entity Name: WAY-WHITEHOUSE MEMORIAL AMVETS (AMERICAN VETERANS) POST 35, INC.

Current Principal Place of Business:

105 JOHN KING RD.
C/O JESSE D. WAY
CRESTVIEW, FL 325398307 US

New Principal Place of Business:

Current Mailing Address:

105 JOHN KING RD.
C/O JESSE D. WAY
CRESTVIEW, FL 325398307 US

New Mailing Address:

FEI Number: 59-2863189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WAY, JESSE D
105 JOHN KING RD
CRESTVIEW, FL 325398307 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 () Delete
Name: HAFNER, WILLIAM D
Address: 4805 YOUNG RD
City-St-Zip: CRESTVIEW, FL 325396348 US

Title: PD () Delete
Name: WAY, JESSE D D
Address: 1217 VALLEY RD
City-St-Zip: CRESTVIEW, FL 325398306 US

Title: T () Delete
Name: HOON, BRUCE R D
Address: 2826 TAMIAMI TRAIL
City-St-Zip: CRESTVIEW, FL 325395726 US

Title: D () Delete
Name: HINRICHS, STEVEN W D
Address: 1362 PLEASANT TERR
City-St-Zip: CRESTVIEW, FL 325399038 US

Title: D () Delete
Name: WESTBY, ELIZABETH
Address: 4767 BALBOA RD
City-St-Zip: CRESTVIEW, FL 325396349 US

Title: S () Delete
Name: ETHRIDGE, JOHN R
Address: 3288 FAIRVIEW AVE
City-St-Zip: CRESTVIEW, FL 32539 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: SARRASIN, CRAIG D
Address: 2822 OLD MILL WAY
City-St-Zip: CRESTVIEW, FL 32539 US

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: JESSE D, WAY

PD

01/18/2009

Electronic Signature of Signing Officer or Director

Date