

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N17381

FILED  
Oct 14, 2009  
Secretary of State

**Entity Name:** BREVARD COUNTY POST NO. 8116 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

**Current Principal Place of Business:**

3655 PARRISH ROAD  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

3655 PARRISH ROAD  
COCOA, FL 32926

**New Mailing Address:**

**FEI Number:** 59-6209811      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

JENKINS, ALFRED J SR  
979 BAYBERRY LANE  
ROCKLEDGE, FL 32955      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: ALFRED J. JENKINS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD      ( ) Delete  
Name: JENKINS, ALFRED J SR  
Address: 873 LEVITT PARK WAY  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D      ( ) Delete  
Name: JOHNSON, JAMES E  
Address: 1870 CARLTON STREET  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D      ( ) Delete  
Name: KIMBROUGH, JESSE J  
Address: 322 SUNDAIL COURT  
City-St-Zip: COCOA, FL 32926

Title: D      ( ) Delete  
Name: STEELE, WARREN L SR  
Address: 6380 ABISCO ROAD  
City-St-Zip: COCOA, FL 32927

Title: D      ( ) Delete  
Name: RICE, RODELL B  
Address: 916 BEAVERDALE LN  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D      ( ) Delete  
Name: HARRIS, ERIC L  
Address: 1616 ARNOLD DRIVE  
City-St-Zip: MELBOURNE, FL 32935

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CD      (X) Change ( ) Addition  
Name: JENKINS, ALFRED J SR  
Address: 979 BAYBERRY LANE  
City-St-Zip: ROCKLEDGE, FL 32955

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:

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: ALFRED J. JENKINS

Electronic Signature of Signing Officer or Director

CD

10/14/2009

Date