

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2009
Secretary of State

DOCUMENT# N30325

Entity Name: GIBSONIA-KATHLEEN POST 8002 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:

9398 US HWY 98 N
LAKELAND, FL 33810 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 328
KATHLEEN, FL 33849

New Mailing Address:

FEI Number: 59-2918931 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, RONALD J
8515 CHERRY HILL DR
LAKELAND, FL 33810 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: CD () Delete
Name: WHITE, RONALD J
Address: 8515 CHERRY HILL DR
City-St-Zip: LAKELAND, FL 33810

Title: Q () Delete
Name: MCINTIRE, NATTA
Address: 5276 MT. TABER RD
City-St-Zip: LAKELAND, FL 33810

Title: D () Delete
Name: NERI, DENNIS M
Address: 2117 RANCH LAND RD
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: KNOPE, JOHN B
Address: 9411 BIG APPLE RD
City-St-Zip: LAKELAND, FL 33810

Title: S () Delete
Name: BROSLIE, HAROLD
Address: 825 W SOCRUN LOOP RD
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: NATT A MC INTIRE

Electronic Signature of Signing Officer or Director

QM

02/04/2009

Date