2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30542

FILED Apr 12, 2009 Secretary of State

Entity Nam	ne: AMVETS	POST 18 EATONVILLE CORF	PORATION	•	
Current Pr	incipal Place	of Business:	New Principal Place	of Business:	
AMVETS P P.O. BOX 2 EATONVILI					
Current Ma	ailing Addres	s:	New Mailing Addres	New Mailing Address:	
P.O. BOX 2009 EATONVILLE, FL 32751			AMVETS POST 18 P.O. BOX 2009 EATONVILLE, FL 327		
FEI Number:	59-2895857	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ORLANDO	'HAWK AVE , FL 32808 named entity s	US ubmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electroni	ic Signature of Registered Age	ent	Date	
OFFICERS	AND DIRECT	rors:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	T () HUMPHREY, RU 3851 KITTY HAV ORLANDO, FL	VK AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () MCWHITE, SAM 648 DEPUGH S ORLANDO, FL	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () BATTLES, ARTH 1569 POPPY AV ORLANDO, FL	/ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: RUFUS HUMPHRREY CMDR 04/12/2009