

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35852

FILED
Jan 07, 2011
Secretary of State

Entity Name: CHAPTER 58, THE RETIRED ENLISTED ASSOCIATION, INC.

Current Principal Place of Business:

ENLISTED CLUB
MACDILL AFB
TAMPA, FL 336080676 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6676
MACDILL AFB
TAMPA, FL 336080676 US

New Mailing Address:

FEI Number: 59-2982474 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ARANA, LOUIS A SR
449 COUNTRY VINEYARD DR.
VALRICO, FL 33594 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: PST
Name: ARANA, LOUIS A SR
Address: 449 COUNTRY VINEYARD DR.
City-St-Zip: VALRICO, FL 33594

Title: VP
Name: BLACK, LEONARD
Address: 17836 FALLOWFIELD DR
City-St-Zip: LUTZ, FL 33544

Title: VP
Name: JHONSON, HARRY C
Address: P O BOX 5
City-St-Zip: LORIDA, FL 33857

Title: D
Name: CARLOS, BARRADAS A
Address: 346 SUMMER SAIL DR
City-St-Zip: VALRICO, FL 33594

Title: D
Name: ATWOOD, HAROLD
Address: 4922 OHIO AVE
City-St-Zip: TAMPA, FL 33616

Title: D
Name: GATHERS, PETER
Address: 1604 RYDELL LN
City-St-Zip: PLANT CITY, FL 33563

I hereby 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 all other like empowered.

SIGNATURE: LOUIS A., ARANA

PRES

01/07/2011

Electronic Signature of Signing Officer or Director

Date