

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000098

FILED
Apr 30, 2008
Secretary of State

Entity Name: RAYMOND E. DARLING VFW POST 6023, INC.

Current Principal Place of Business:

16701 SW MORGAN STREET
INDIANTOWN, FL 34956

New Principal Place of Business:

Current Mailing Address:

16701 SW MORGAN STREET
INDIANTOWN, FL 34956

New Mailing Address:

FEI Number: 59-6111356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WITTENMYER, ERNEST
16701 SW MORGAN STREET
INDIANTOWN, FL 34956 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: VD () Delete
Name: MILLER, RALPH
Address: 16701 SW MORGAN ST.
City-St-Zip: INDIANTOWN, FL 34956

Title: DS () Delete
Name: OLSEN, PAUL
Address: 16701 SW MORGAN STREET
City-St-Zip: INDIANTOWN, FL 34956

Title: DP () Delete
Name: FRANK, MURPHY
Address: 16701 SW MORGAN STREET
City-St-Zip: INDIANTOWN, FL 34956

Title: TD () Delete
Name: STRIPLING, KEVIN
Address: 16701 SW MORGAN STREET
City-St-Zip: INDIANTOWN, FL 34956

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: GUERRERO, ARMANDO
Address: 16701 SW MORGAN ST.
City-St-Zip: INDIANTOWN, FL 34956

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: ARMANDO GUERRERO

VD

04/30/2008

Electronic Signature of Signing Officer or Director

Date