2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000551

FILED Jan 29, 2008 Secretary of State

Entity Name: AMERICAN VETERANS POST 0001, INC.

Current Principal Place of Business: New Principal Place of Business:

421 45TH AVE. SO. ST PETERSBURG, FL 33705

Current Mailing Address: New Mailing Address:

421 45TH AVE. SO. ST PETERSBURG, FL 33705

FEI Number: 59-2899307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHOKEY, JOHN G
TACKETT, PHILLIP E
6390 12TH ST S
3540 COQUINA KEY DR SE

ST PETERSBURG, FL 33705 US ST PETERSBURG, FL 33705 US

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: PHILLIP E. TACKETT 01/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: SHOKEY, JOHN G Name: TACKETT, PHILLIP E

Name:SHOKEY, JOHN GName:TACKETT, PHILLIP EAddress:6391 12TH STREET SOUTHAddress:3540 COQUINA KEY DR SECity-St-Zip:SAINT PETERSBURG, FL 33705City-St-Zip:SAINT PETERSBURG, FL 33705

Title: DC () Delete Title: DC (X) Change () Addition Name: HEINL, DAVE DAVIDSON, ALLEN

Address: 3775 40TH LN S Address: 4431 7TH ST S

City-St-Zip: SAINT PETERSBURG, FL 33711 City-St-Zip: SAINT PETERSBURG, FL 33711

Title: TD () Delete Title: DC (X) Change () Addition Name: FERRELL, BILL Name: DAVIS, GIL

Address: 3645 BEACH DRIVE, SOUTHEAST Address: 3835 35TH WAY S
City-St-Zip: SAINT PETERSBURG, FL 33705 City-St-Zip: SAINT PETERSBURG, FL 33711

Title: D (X) Delete Title: () Change () Addition Name: DAVIS, GIL Name:

 Address:
 3835 35TH WY S
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33711
 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: PHILLIP E. TACKETT TREA 01/29/2008