

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002246

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** AMVETS, HUDSON POST # 16, INC.

**Current Principal Place of Business:**

9638 STATE RD. 52  
HUDSON, FL 34669

**New Principal Place of Business:**

**Current Mailing Address:**

9638 STATE RD. 52  
HUDSON, FL 34669

**New Mailing Address:**

**FEI Number:** 59-3257809

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMES, JAMES JOHNSON  
11100 LINDEN DRIVE  
SPRINGHILL, FL 34609 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: COMM  
Name: DAVIS, RICHARD C  
Address: 8810 SCHRADER BLVD  
City-St-Zip: PORT RICHEY, FL 34668

Title: VCOM  
Name: JOHNSON, JAMES  
Address: 11100 LINDEN DR.  
City-St-Zip: SPRING HILL, FL 34607

Title: FO  
Name: GEBBING, ALBERT  
Address: 83086 SAND WEDGE CIR  
City-St-Zip: HUDSON, FL 34667

Title: ADJU  
Name: SUPER, THEODORE  
Address: 15420 AUBAEY AVE  
City-St-Zip: SPRING HILL, FL 34610

Title: TR  
Name: COOKE, JIM  
Address: 11927 QUINCY DR.  
City-St-Zip: NEW PORT RICHEY, FL 34654

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: ALBERT GEBBING

FO

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date