2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2008
Secretary of State

DOCUMENT# N94000002690

Entity Name: BISHOP CHARLES B. MCLAUGHLIN POST 1917, CATHOLIC WAR VETERANS OF THE UNITED STATES OF AMERICA, INC., OF LAKELAND, FLORIDA

Current Principal Place of Business:

210 W LEMON ST
LAKELAND, FL 33802 US

New Principal Place of Business:

Current Mailing Address:

2035 CONRAD ST
LAKELAND, FL 33801 US

New Mailing Address:

FEI Number: 59-3153597 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JONES, STEVE V
820 CUMBERLAND STREET
LAKELAND, FL 33801 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: TRES ( ) Delete
Name: BURZYNSKI, RALPH
Address: 2035 CONRAD ST
City-St-Zip: LAKELAND, FL 33801

Title: CMDR ( ) Delete
Name: JONES, STEVE V
Address: 820 CUMBERLAND ST
City-St-Zip: LAKELAND, FL 338015577 US

Title: HIST ( ) Delete
Name: CHMIELESKI, RAYMOND S
Address: 3628 LAZY LAKE DRIVE SOUTH
City-St-Zip: LAKELAND, FL 33801 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: STEVE V. JONES CMDR 05/11/2008
Electronic Signature of Signing Officer or Director — Date