## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000003380

Jul 15, 2007 Secretary of State

Entity Name: NAPLES MEMORIAL POST NO. 7369 VETERANS OF FOREIGN WARS OF THE UNITED STATES,

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

2405 LINWOOD AVE NAPLES, FL 34112 US

**Current Mailing Address: New Mailing Address:** 

2405 LINWOOD AVE NAPLES, FL 34112 US

FEI Number: 65-0463066 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: Name and Address of New Registered Agent:

NEDBALSKI, MICHAEL READER, PHILIP 283 FOREST HILLS BLVD 7340 PRÓVINCE WAY #3104 NAPLES, FL 34113 NAPLES, FL 34104

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: PHILIP A. READER 07/15/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

ULLRICH, ROBERT Name: Name: Address: 1642 LA PETITE CT Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip:

Title: DM () Delete Title: () Change () Addition

Name: WHITE, JERRY Name: Address: 2805 LINWOOD AVE Address: City-St-Zip: NAPLES, FL 34113 City-St-Zip:

Title: () Delete Title: QΜ (X) Change ( ) Addition

NEDBALSKI, MICHAEL Name: READER, PHILIP Name: 283 FOREST HILLS BLVD 7340 PROVINCE WAY #3104 Address: Address:

City-St-Zip: NAPLES, FL 34113 City-St-Zip: NAPLES, FL 34104

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: PHILIP A. READER QM 07/15/2007