2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004764

FILED Feb 08, 2007 Secretary of State

Entity Name: OCEANWAY POST NO. 11406 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
17 PONCE JACKSON	E BLVD N VILLE, FL 32218	US			
Current M	lailing Address:		New Mailing Addre	ss:	
P. O. BOX JACKSON	28084 VILLE, FL 32218	US			
FEI Number:	: 59-3240613 F	El Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Curr	ent Registered Agent:	Name and Address	of New Registered Agent:	
10429 PIN	I, RONALD C EHURST DR VILLE, FL 32218	US			
	named entity subre of Florida.	mits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATUF	RE:				
SIGNATUF		Signature of Registered Ag	ent	Date	
		-		Date BES TO OFFICERS AND DIRECTORS:	
	Electronic S	RS: ete 3 JR RD			
OFFICER: Title: Name: Address:	Electronic S S AND DIRECTOR D () Dele BRIDGES, JAMES B 3652 NEW BERLIN	RS: ete 3 JR RD - 32226 ete S	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTORS:	
OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	D () Dela MOHLER, PHILLIP 10816 HAWAII DR S	RS: ete 3 JR RD - 32226 ete S - 32246 ete	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	SES TO OFFICERS AND DIRECTORS: () Change () Addition	
OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	Electronic S S AND DIRECTOR D () Dele BRIDGES, JAMES E 3652 NEW BERLIN JACKSONVILLE, FL D () Dele MOHLER, PHILLIP S 10816 HAWAII DR S JACKSONVILLE, FL D () Dele LIKER, JAMES H 11342 MCALLISTER	RS: ete 3 JR RD - 32226 ete S - 32246 ete R BLVD - 32218 ete D C DR	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTORS: () Change () Addition () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES B. BRIDGERS, JR MR 02/08/2007