

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000683

FILED
Feb 21, 2008
Secretary of State

Entity Name: ENLISTED NATIONAL GUARD ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

ENGAF
82 MARINE STREET
ST AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

PO BOX 3446
ST AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 59-3381026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PAUL, MARY
82 MARINE STREET
SAINT AUGUSTINE, FL 32084 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: PD () Delete
Name: DUMAS, LEIGH
Address: 82 MARINE STREET
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VD () Delete
Name: ANGEL, GOMEZ
Address: 82 MARINE STREET
City-St-Zip: ST AUGUSTINE, FL 32084

Title: VD () Delete
Name: SHERWOOD, GRETCHEN
Address: 228 WEST 68TH ST
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: PAUL, MARY
Address: 82 MARINE STREET
City-St-Zip: SAINT AUGUSTINE, FL 32085

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:

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: MARY E. PAUL

MRS.

02/21/2008

Electronic Signature of Signing Officer or Director

Date