## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000002346

FILED Mar 15, 2008 Secretary of State

Entity Name: ST. AUGUSTINE BRANCH NO. 25 FLEET RESERVE ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
112 JUPITE ST. AUGUS	ER RD STINE, FL 32	0866720 US			
Current Mailing Address:			New Maili	New Mailing Address:	
112 JUPITE ST. AUGU	ER RD STINE, FL 32	0866720 US			
FEI Number: 59-3446468 FEI Number Applied For ( ) FEI N			FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
GRAY, DO 112 JUPITE ST AUGUS		0866720 US			
	named entity: e of Florida.	submits this statement for the pu	pose of changing i	ts registered office or registered agent, or both,	
SIGNATUF	RE:				
	Electror	nic Signature of Registered Agen	t	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GRIFFING, TIN 311 12TH STR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WOOD, WILLIA 23 SEVILLA ST		Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition SUART, EDWARD R V 104 DRAKE ROAD ST. AUGUSTINE, FL 320866202 US	
Title: Name: Address: City-St-Zip:	GRAY, DONAL 112 JUPITER F		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MACDONALD, 229 KINGSTON		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	D ( ) SUART, EDWA 104 DRAKE RI		Title: Name: Address:	D (X) Change ( ) Addition HEAGY, PAUL M D 118 QUEEN ROAD	

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: DONALD R GRAY S 03/15/2008