2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000003200

FILED Nov 03, 2008 Secretary of State

Entity Name: MID-POINT CAPE CORAL POST 492, VETERANS OF FOREIGN WARS OF THE UNITED STATES,

INC.

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

904 ISLAMORADA BLVD. 226 SE 8TH ST

PUNTA GORDA, FL 33955 CAPE CORAL, FL 33990

Current Mailing Address: New Mailing Address:

VFW POST 492 P.O. BOX 151716 CAPE CORAL, FL 33915

FEI Number: 65-0747157 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:

HEENEKE, RICHARD 904 ISLAMORADA BLVD. PUNTA GORDA, FL 33955 US

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: RICHARD HEENEKE

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C () Delete Title: () Change () Addition

 Name:
 HEENEKE, RICHARD
 Name:

 Address:
 904 ISLAMORADA BLVD.
 Address:

 City-St-Zip:
 PUNTA GORDA, FL 33955
 City-St-Zip:

Title: JVC () Delete Title: () Change () Addition

 Name:
 CHOVAN, PETÉR J
 Name:

 Address:
 4213 7TH PLACE
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33914
 City-St-Zip:

Title: SDC () Delete Title: () Change () Addition

 Name:
 RAMSDEN, DARRELL S
 Name:

 Address:
 211 SE 3RD
 Address:

 City-St-Zip:
 CAPE CORAL, FL 339901088
 City-St-Zip:

Title: QM () Delete Title: () Change () Addition

 Name:
 DUBUQUE, JOSEPH
 Name:

 Address:
 226 SE 8TH STREET
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33990
 City-St-Zip:

Title: SO () Delete Title: () Change () Addition

 Name:
 RAMSDELL, NIEL R
 Name:

 Address:
 14712 CONSTITUTION WAY
 Address:

 City-St-Zip:
 NORTH FORT MYERS, FL 339174053
 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: JOSEPH DUBUQUE QM 11/03/2008