

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # N98000004251

1. Entity Name

ARMED FORCES SERVICE CENTER, INC.



Principal Place of Business

Mailing Address

MIAMI INTERNATIONAL AIRPORT
CONCOURSE B ROOM 4120
MIAMI FL 33299

P.O. BOX 998014
MIAMI FL 33299



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITBECK, KEITH V
9057 SW 161 TERR
MIAMI FL 33157

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature is required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME WHITBECK, KEITH V
STREET ADDRESS 9057 S W 161 TER
CITY-ST-ZIP MIAMI FL 33157

TITLE VD ☐ Delete
NAME BODNER, STAN
STREET ADDRESS PO BOX 660466
CITY-ST-ZIP MIAMI FL 33266

TITLE TSD ☐ Delete
NAME TANOS, ALEXANDER E
STREET ADDRESS 7333 BELLE MEADE BLVD.
CITY-ST-ZIP MIAMI FL 33138

TITLE SD ☐ Delete
NAME BODNER, STAN
STREET ADDRESS PO BOX 660466
CITY-ST-ZIP MIAMI FL 33266

TITLE VP ☐ Delete
NAME TANOS, GLADYS
STREET ADDRESS 7333 BELLE MEADE BLVD
CITY-ST-ZIP MIAMI FL 33138

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000913/46
CITY-ST-ZIP 05/08/08-80029-001 70.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Keith V. Whitbeck

04/18/08

305-968-4399