

Date: _____

ELECTION OF OFFICERS FORM

Corporation Name: _____

Address: _____
 Address _____ Apt _____
 City _____ State _____ Zip _____

At a special meeting held on this day at the above premises, stockholders of _____
 nominated and duly elected by unanimous vote the following officers:

President: _____
 Full Name _____ SSN _____ # of shares _____ Drivers lic. # _____
 Address _____ Apt _____ City _____ State _____ Zip _____

Vice Pres: _____
 Full Name _____ SSN _____ # of shares _____ Drivers lic. # _____
 Address _____ Apt _____ City _____ State _____ Zip _____

Secretary: _____
 Full Name _____ SSN _____ # of shares _____ Drivers lic. # _____
 Address _____ Apt _____ City _____ State _____ Zip _____

Treasurer: _____
 Full Name _____ SSN _____ # of shares _____ Drivers lic. # _____
 Address _____ Apt _____ City _____ State _____ Zip _____

Secretary (Print)	Secretary (Signature)	Date
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"I hereby affirm, under penalty of law, that I have examined and reviewed the information in the submitted form(s) or application(s), including any supplemental form(s) and/ or document(s) and that these document(s) and or statement(s) do not contain any untrue statement(s) nor are they missing any material information and/ or fact(s). I also acknowledge and understand that any false statement(s) submitted is punishable under the law and may result in a denial of an application or the suspension or revocation of an existing license/permit."

Name: _____ Signature: _____

Title: _____ Date: _____