


FILED
Apr 22, 1999 8:00 am
Secretary of State

04-22-1999 90085 028 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 707925

1. Corporation Name
WM. C. MORRIS POST NUMBER 36, AMERICAN LEGION, I NC.

Principal Place of Business 36 S FEDERAL HIGHWAY FORT LAUDERDALE FL 33301	Mailing Address 36 S FEDERAL HIGHWAY FORT LAUDERDALE FL 33301
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2. Principal Place of Business 21 1620 W. State Rd. 84 Suite, Apt. #, etc.	2a. Mailing Address 26 1620 W. State Rd. 84 Suite, Apt. #, etc.	3. Date Incorporated or Qualified 10/05/1964
22 City & State 23 Ft. Lauderdale, FL Zip Country 24 33315-2219 25 BROWARD	27 City & State 28 Ft. Lauderdale, FL Zip Country 29 33315-2219 30 BROWARD	4. FEI Number 59-0563907 Applied For Not Applicable
9. Name and Address of Current Registered Agent ADASCHIK, ALLEN 1728 SW 5TH CT APT A FT LAUDERDALE FL 33312		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
		81 Name JONATHON J. BONI	
		82 Street Address (P.O. Box Number is Not Acceptable) 1620 W. State Rd. 84	
		83	
		84 City Ft. Lauderdale	85 Zip Code FL 33315

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Jonathon J. Boni** *Jonathon J. Boni 30 April 99* DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ADASCHIK, ALLEN		1.2 NAME	
STREET ADDRESS 1728 SW 5TH CT		1.3 STREET ADDRESS	
CITY-ST-ZIP FT LAUDERDALE FL 33312		1.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SAPP, LARRY		2.2 NAME	
STREET ADDRESS 3000 HOLIDAY DR		2.3 STREET ADDRESS	
CITY-ST-ZIP FT LAUDERDALE FL 33316		2.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BONI, JONATHAN		3.2 NAME	
STREET ADDRESS 36 S. FED HIGHWAY		3.3 STREET ADDRESS	
CITY-ST-ZIP FT LAUDERDALE FL		3.4 CITY-ST-ZIP	
TITLE LOWERY, EARL D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS 1004 CITRUS ISLE		4.3 STREET ADDRESS	
CITY-ST-ZIP FT LAUD, FL 33315		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Jonathon J. Boni** *Jonathon J. Boni 30 April 99* DATE (954) 463-0146

Jonathon J. Boni Connection 1 May 99

CR2E037-141001