2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2009
Secretary of State

DOCUMENT# 715407

Entity Name: NEWBERRY POST NO. 149, THE AMERICAN LEGION, DEPARTMENT OF FLORIDA

Current Principal Place of Business:

26821 W NEWBERRY ROAD
NEWBERRY FLA, 32669 US

New Principal Place of Business:

26821 W NEWBERRY ROAD
NEWBERRY, FL 32669 US

Current Mailing Address:

PO BOX 1
NEWBERRY, FL 32669 US

New Mailing Address:

FEI Number: 59-6200333 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JARVIS, CHARLES
8860 SE 64TH ST
NEWBERRY, FL 32669 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	C	( ) Delete
Name:	RAMOS, JIM	
Address:	6609 S.E. 85 AVENUE	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	VST	( ) Delete
Name:	JARVIS, CHARLES E	
Address:	8860 SE 64TH STRETT	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	OD	( ) Delete
Name:	NICKERSON, DENNIS D	
Address:	481 SE HAPPY VALLEY RD	
City-St-Zip:	HIGH SPRINGS, FL 32643	
Title:	V	( ) Delete
Name:	TERRY, WRIGHT E JR.	
Address:	3328 N.W. 245 TERRACE	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	D	( ) Delete
Name:	SABO, PETER	
Address:	829 NW 124 DR	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	OD	( ) Delete
Name:	FIDLER, CHARLES B	
Address:	25909 NW 122ND AVE	
City-St-Zip:	HIGH SPRINGS, FL 32643	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	OD	(X) Change ( ) Addition
Name:	FIDLER, CHARLES B	
Address:	26003 NW 122ND AVE	
City-St-Zip:	HIGH SPRINGS, FL 32643	

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: CHARLES E, JARVIS VST 02/01/2009

Electronic Signature of Signing Officer or Director — Date