

3/3/00

FILED

May 17, 2000 8:00 am
Secretary of State

03-03-2000 90032 006 ****61.25

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 716081

Entity Name

LEESBURG MEMORIAL POST NO. 52, DEPARTMENT OF FLO

Principal Place of Business

Mailing Address

THE AMERICAN LEGION INC

300 N. THIRD ST.

LEESBURG FL 34748

THE AMERICAN LEGION INC

300 N. THIRD ST.

LEESBURG FLA 34748-5108

402771



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

59-6200815

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

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

City

FL

Zip Code

TURNBULL, JAMES R

163 BAY ROAD

MT. DORA FL 32751

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.

SIGNATURE *James R. Turnbull*

COMMANDER

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

(NOTE: Registered Agent signature required when reinstating)

DATE

*Jan. 30, 2000*FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TD	☒ Delete	TITLE	SD	☒ Change ☐ Addition
NAME	SAWDEY, HAROLD W		NAME	CARL A. BROOKS	
STREET ADDRESS	11203 U.S. HWY 441		STREET ADDRESS	25037 BENTON HILL	
CITY-ST-ZIP	TAVARES FL 32778		CITY-ST-ZIP	LEESBURG, FL. 34748	
TITLE	PD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	TURNBULL, JAMES R		NAME		
STREET ADDRESS	163 BAY ROAD		STREET ADDRESS		
CITY-ST-ZIP	MOUNT DORA FL 32757		CITY-ST-ZIP		
TITLE	SD	☒ Delete	TITLE	FD	☒ Change ☐ Addition
NAME	LOGAN,		NAME	STEVEN W. DUNBAR	
STREET ADDRESS	LEESBURG FL 34778		STREET ADDRESS	3600 E. SPRING LAKE	
CITY-ST-ZIP			CITY-ST-ZIP	FRUITLAND PARK FL 34731	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. 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 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: *James R. Turnbull* COMMANDER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 30, 2000

Date

Daytime Phone #

352-383-6426

CR2E037 (9/99)