2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716869

FILED Mar 27, 2007 Secretary of State

Entity Name: DELAND AMERICAN LEGION POST NUMBER SIX, INC.

Current Principal Place of Business: New Principal Place of Business:

1087 BISCAYNE BLVD. DELAND, FL 32724 US

Current Mailing Address: New Mailing Address:

1087 BISCAYNE BLVD DELAND, FL 32724 US

FEI Number: 59-1301809 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CLARK, FRANCIS J CORNING, DAVID L
127 BLAKE ST. 215 ROBINHOOD DRIVE
PIERSON, FL 32180 US DELAND, FL 32724 US

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: DAVID L. CORNING 03/27/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 CLARK, FRANCIS J
 Name:
 CORNING, DAVID L

 Address:
 127 BLAKE ST.
 Address:
 215 ROBINHOOD DRIVE

 City-St-Zip:
 PIERSON, FL 32180
 City-St-Zip:
 DELAND, FL 32724

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 RUST, HOLGER
 Name:
 CLARK, FRANCIS J

 Address:
 1274 HICKORY LANE
 Address:
 127 BLAKE ST.

 City-St-Zip:
 DELAND, FL 32724
 City-St-Zip:
 PIERSON, FL 32180

Title: D () Delete Title: TD (X) Change () Addition Name: CORNING, DAVID L Name: PAIGE, LEONA A

Address: 215 ROBINHOOD DR. Address: 1401 NORTH ALABAMA AVE.

City-St-Zip: DELAND, FL 32724 City-St-Zip: DELAND, FL 32724

Title: TD (X) Delete Title: () Change () Addition Name: PAIGE, LEONA A Name:

PAIGE, LEONA A

1408 N. ALABAMA AVE.

DELAND, FL 32724

Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID L. CORNING PD 03/27/2007