2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 30, 2008
Secretary of State

DOCUMENT# 716869

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

Current Principal Place of Business:

1087 BISCAYNE BLVD.
DELAND, FL 32724 US

New Principal Place of Business:

Current Mailing Address:

1087 BISCAYNE BLVD.
DELAND, FL 32724 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

CORNING, DAVID L
215 ROBINHOOD DRIVE
DELAND, FL 32724 US

Name and Address of New Registered Agent:

RUST, HOLGER
1274 HICKORY LANE
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: HOLGER RUST 09/30/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CORNING, DAVID L
Address: 215 ROBINHOOD DRIVE
City-St-Zip: DELAND, FL 32724

Title: TD ( ) Delete
Name: CLARK, FRANCIS J
Address: 127 BLAKE ST.
City-St-Zip: PIERSON, FL 32180

Title: SD ( ) Delete
Name: HEUDUCK, LARRY
Address: 2959 PAOLINI DR.
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CMDR (X) Change ( ) Addition
Name: RUST, HOLGER
Address: 1274 HICKORY LANE
City-St-Zip: DELAND, FL 32724

Title: FO (X) Change ( ) Addition
Name: FISHER, HOWARD L
Address: 1449 BENT OAKS BLVD
City-St-Zip: DELAND, FL 32724

Title: VCMD (X) Change ( ) Addition
Name: SLEEPER, ROY
Address: 500 BRIAR OAK WAY
City-St-Zip: DELAND, FL 32724

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: HOLGER RUST CMDR 09/30/2008
Electronic Signature of Signing Officer or Director Date