## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

THE HEISLER-JOHNSON AMERICAN LEGION POST NO. 119 , THE AMERICAN LEGION, DEPARTMENT OF FLORIDA					<u> </u>		
Principal Plac	e of Business	Mailing Addr	ess			t andern fanne finte inden diese mitt neit nicht nam dien nicht nicht nicht nicht finte nicht finte in die eine	
130 FIRST AVE. S.W. 130 FIRST AVE. S.W. P.O. BOX 794 P.O. BOX 794						3. Date Incorporated or Qualified 11/10/1969	
LARGO FL 34649-7794 LARGO FL 34649-7794			649-7794			4. FEI Number Applied For	
						<b>59-6173244</b> Not Applical	
21	lace of Business	26				5. Certificate of Status Desired S8.75 Additional Fee Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State	6	City & Ste	ite			7. Is this nonprofit corporation a homeowners association?	
23		28	— ·			☐ Yes 🔀 No	
Zip	Country	Zip	ļ	Country	,	8. This corporation owes or has paid the current year intangible	
24	9. Name and Address of Curr	29	30			Personal Property Tax due June 30.	
	9. Name and Address of Con	elli negistered Age		81	Name .	(U. Name and Address of New Houseless Agent	
MCGOWAN, CHARLES F 7349 ULMERTON RD LOT 1087 LARGO FL 33771				82 83	Street Ad		
				84	City	rs o FL 85 Zip Code 3377 0	
11. Pursuant	to the provisions of Sections 617.0	602 and 617.1508, F	lorida Statutes, the	e above	-named co	orporation submits this statement for the purpose of changing its register	
office or r	egistered agent, or both, in the Sta im familiar with, and accept the pb	ate of Florida. Such of Jigations of Section 6	hange was author 317.0503. Florida :	rized by Statutes	r the corpor s.	orporation submits this statement for the purpose of changing its registers ration's board of directors. I hereby accept the appointment as registered	
	11.11 ~ ( \( \frac{1}{2} \)	1.1			-	03-05-98  Quired when reinstaling)  DATE	
	Signalure typed or printed name of registered				nt signature rec		
12.	<del>,</del>	AND DIRECTORS		.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	PD   McDermott, Robert	_		.2 NAME	1		
STREET ADDRESS	2118 MARY SUE ST			.2 NAME 1.3 STREET	AUDRESS		
CITY-ST-ZIP	LARGO FL			.4 CITY - S			
TITLE	VD			1 TITLE	1-21	Change Addit	
NAME	ARTHUR, GEORGE R		_	2 NAME		,	
STREET ADDRESS	12734 111TH LANE N.			3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO FL		_	4 CITY-S	1	er i i	
TITLE	SD			L1 TITLE		5 D	
NAME	MCGOWAN, CHARLES F		3	.2 NAME		John a Heisler Jr	
STREET ADDRESS	7349 ULMERTON RD., #10	67	3	.3 STREET		195 10TH AND SW	
CITY-ST-ZIP	LARGO FL		3	4. CITY-S	ST-ZIP	Larso, PL 33770	
TITLE	1D			I TITLE		Change Addit	
NAME	SCHWEITZER, JON R		14	. 2 NAME	Ī		
STREET ADDRESS	601 STARKEY RD		<b>.</b>	I.3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO FL			A CITY-S	T- ZIP		
TITLE	M		DELETE 5	.1 TITLE		Change Addit	
NAME	HEISLER, CAROLYN S.		5	2 NAME			
STREET ADDRESS	195 10TH AVENUE, S.W.		5	.3 STREET	ADDRESS		
CITY-ST-ZIP	LARGO FL			.4 CITY-S	T-ZIP		
TITLE			DELETE 6	.1 TITLE		☐ Change ☐ Addit	
NAME	,		₫ 6	.2 NAME	ļ		
STREET ADDRESS			6	.3 STREET	ADDRESS		
CITY-ST-7IP			6	A CITY-S	T. 7(P		

14. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

**FILED** 

Mar 11 1998 8:00am

Secretary of State