2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 15, 2000 8:00 am Secretary of State DOCUMENT # **717530** 1. Entity Name THE HEISLER-JOHNSON AMERICAN LEGION POST NO. 119 03-15-2000 90085 007 \*\*\*\*61.25 Principal Place of Business Mailing Address 130 FIRST AVE. S.W. 130 FIRST AVE. S.W. P.O. BOX 794 P.O. BOX 794 LARGO FL 34649-7794 LARGO FL 33779 0794 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-6173244 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MeisLeir Street Address (P.O. Box Number is Not Acceptable) DEAK, JOSEPH S 605 15TH AVE NW S.W. LARGO FL 33770 Zip Code 33770 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. 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Change TITLE Addition TITLE □ Delete Salamon MCDERMOTT, ROBERT Fraderick E. NAME NAME 749 Jasper ST. STREET ADDRESS STREET ADDRESS 2118 MARY SUE ST CITY-ST-ZIP CITY-ST-ZIP argo, FL LARGO FL hange ☐ Addition TITLE ☐ Delete TITLE Henry Moses 1808 Emory Dn NAME arthur, george r NAME STREET ADDRESS 12734 111TH LANE N. STREET ADDRESS Clearwoter, FL 33765 CITY-ST-ZIP CITY-ST-ZIP LARGO FL ☐ Addition SD John U. Heisler Jr 195 10th Ave. Sw **C**hange TITLE TITLE □ Delete DEAK, JOSEPH S NAME NAME STREET ADDRESS STREET ADDRESS 605 15TH AVE NW CITY-ST-7IB CITY-ST-ZIE LARGO FL 33770 arso, TITLE TD Delete TITLE Change Addition SCHWEITZER, JON R NAME NAME SAME STREET ADDRESS STREET ADDRESS 601 STARKEY RD CITY-ST-ZIP CITY-ST-ZIP LARGO FL ☐ Delete ☐ Change Addition HEISLER, CAROLYN S. Same STREET ADDRESS 195 10TH AVENUE, S.W. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LARGO FL Change \_ \_\_\_\_Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 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

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