2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#732889

FILED Mar 01, 2007 Secretary of State

Entity Name: AMERICAN LEGION, CAMPBELL-LOSSING POST 53, INC., DEPARTMENT OF FLORIDA

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

P.O. BOX #53 2874 S. SANFORD AVE. SANFORD, FL 32772 SANFORD, FL 32772

Current Mailing Address: New Mailing Address:

P.O. BOX #53 P.O. BOX #53

SANFORD, FL 32772 SANFORD, FL 32772 US

FEI Number: 59-6200272 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GRAHAM, CHARLES B 855 SILVERADO CT LAKE MARY, FL 32746

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:

Date

Electronic Signature of Registered Agent

US

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

SPANGLER, WALLEY SPANGLER, WALLEY Name: Name: 1907 S. MAGNOLIA AVE Address: 1907 S. MAGNOLIA AVE Address: City-St-Zip: SANFORD, FL 32773 City-St-Zip: SANFORD, FL 32773 US

Title: VC () Delete Title: CD (X) Change () Addition

HOLT, MARY Name: HOLT, MARY Name:

Address: 880 CROWS BLUFF LANE Address: 880 CROWS BLUFF LANE City-St-Zip: SANFORD, FL 32773 City-St-Zip: SANFORD, FL 32773 US

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

GRAHAM, CHARLES B GRAHAM, CHARLES B Name: Name: 855 SILVERADO COURT Address: Address: 855 SILVERADO COURT City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746 US

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

BRENNAN, PATRICK J Name: Name: SMITH, FRANKLIN D 289 MANOR OAK CT 1751 COCHRAN ROAD Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: GENEVA, FL 32732 US

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

HARRINGTON, FRANCIS J BISHOP, LEWIS D Name: Name: 955 SPRING RIDGE DRIVE 116 LAKE DOT DR Address: Address: City-St-Zip: SANFORD, FL 32773 City-St-Zip: DEBARY, FL 32773 US

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: FRANKLIN D. SMITH Т 03/01/2007