

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 17, 2000 8:00 am
Secretary of State

08-17-2000 90101 035 ****61.25

DOCUMENT # 742713

1. Entity Name

U S S TAMPA POST NO. 5 AMERICAN LEGION, DEPARTME



Principal Place of Business

Mailing Address

**3810 W. KENNEDY BLVD.
TAMPA FL 33609**

**3810 W. KENNEDY BLVD.
TAMPA FL 33609**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6151003

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MONFORT, WILLIAM E.
4410 N. 'B' ST.
TAMPA FL 33609**

Name:

Debra J. Roush

Street Address (P.O. Box Number is Not Acceptable)

4320 S. Lois Avenue

City

Tampa

FL

Zip Code

33611

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.

SIGNATURE

Debra J. Roush

8/7/2000

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
D	SPRINGSTON, HERBERT R	4510 S GRADY AVE	TAMPA FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	MCCOY, HARVIE LEE	3108 N B STREET	TAMPA FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
TD	HALL, DAN	3914 OKLAHOMA AVENUE	TAMPA FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
PD	ROUSH, DEBRA J	4320 S LOIS AVE	TAMPA FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VD	CUMBER, HARRY W	511 LAKEVIEW AVE	SEFFNER FL	<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Debra J. Roush **REDACTED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/7/00

Date

(813) 870-0505

Daytime Phone #

CR2E037 (5/00)