2004 NOT-FOR-PROFIT CORPORATION

FILED **ANNUAL REPORT (AR)** Apr 26, 2004 8:00 am Secretary of State DOCUMENT # N02000001413 1. Entity Name 04-26-2004 90543 044 ****70.00 AMERICAN LEGION GULF BREEZE POST 378 INC. Principal Place of Business Mailing Address 5260 GULF BREEZE PARKWAY GULF BREEZE FL 32561 2763 AUGUSTUS ROAD NAVARRE FL 32566 2. Principal Place of Business 3. Mailing Address Gulf Breeze PKW 5260 Suite, Apt. #, etc. MOORE CR2E037 (11/03) BINC Applied For ity & State 4. FEI Number 59-3561900 Breeze Not Applicable 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 Name **BUSINESS FILINGS INCORPORATED** Street Address (P.O. Box Number is Not Acceptable) 660 EAST JEFFERSON STREET TALLAHASSEE FL 32301-0000 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Due By May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ΡD ☐ Change Addition TITLE ☐ Delete TITLE GROOMS, ALAN C NAME NAME 2763 AUGUSTUS ROAD STREET ADDRESS STREET ADDRESS NAVARRE FL 32566 CITY-ST-ZIP CITY-ST-ZIP VPD Addition TIT) F Delete ☐ Change ÄRCHER, LESLIE R NAME 1813 ANDERSON AVENUE STREET ADDRESS STREET ADDRESS **GULF BREEZE FL 32561** CITY-ST-ZIP CITY-ST-ZIP TD Delete Change ☐ Addition TITLE BAXTER LINDA" NAME NAME 1818 ANDERSON AVENUE STREET ADDRESS STREET ADDRESS GULF BREEZE FL 32561 CITY-ST-ZIP CITY-ST-ZIP MIF ☐ Change Addition ☐ Delete TITLE DAULD L. SMITH NAME NAME 5397 PECOS PASS STREET ADDRESS STREET ADDRESS Gulf Brecze FL *325*63 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE SEC TED A FREEMAN

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.

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

32566

PICKARD

SIGNATURE:

TREASUNC

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

1942 ThuMANDR

NAVARRE

DAVID

4 FEB 2004

884-2425 Daytime Phone #

☐ Change

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