

FILE NOW: FILING FEE IS \$61.25

FILED

Jun 11 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N49668 (9)
1. Corporation Name
MULBERRY MEMORIAL POST 72 AMERICAN LEGION INC.



Principal Place of Business Mailing Address
P.O. BOX 217 MULBERRY FL 33860-0217
P.O. BOX 217 MULBERRY FL 33860-0217

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/01/1992		3a. Date of Last Report 02/01/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-2335319		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SMITH, PERRY J 1307 GLENVIEW LANE LAKELAND FL 33813				81	Name Ed Willis Jr.		
				82	Street Address (P.O. Box Number is Not Acceptable) 314 Sunnyhill Ln.		
				83			
				84	City Lakeland	FL	85

11. Pursuant to the provisions of Sections 617.0503 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Ed Willis Jr.* DATE *4-25-97*
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	☒ DELETE		1.1 TITLE	Commander	☐ Change	☒ Addition
NAME	PETRAIN, ALBET			1.2 NAME	Ed Willis Jr		
STREET ADDRESS	6015 CREEKWOOD DR			1.3 STREET ADDRESS	314 Sunnyhill Lane		
CITY-ST-ZIP	LAKELAND FL			1.4 CITY-ST-ZIP	Lakeland FL 33803		
TITLE	D	☒ DELETE		2.1 TITLE	Finance Officer	☐ Change	☒ Addition
NAME	SMITH, PERRY J.			2.2 NAME	Wayne Langdale		
STREET ADDRESS	1307 GLENVIEW LN			2.3 STREET ADDRESS	1647 Mahaffey		
CITY-ST-ZIP	LAKELAND FL			2.4 CITY-ST-ZIP	Lakeland FL 33811		
TITLE	D	☒ DELETE		3.1 TITLE	1st Vice Commander	☐ Change	☒ Addition
NAME	SMITH, SARAH			3.2 NAME	Betty Brooks		
STREET ADDRESS	1307 GLENVIEW LN			3.3 STREET ADDRESS	2503 Kyle St.		
CITY-ST-ZIP	LAKELAND FL			3.4 CITY-ST-ZIP	Lakeland FL 33801		
TITLE	D	☒ DELETE		4.1 TITLE	2nd Vice Commander	☐ Change	☒ Addition
NAME	MITCHELL, JERRY			4.2 NAME	T. J. Lane		
STREET ADDRESS	5148 CIMARRON DR			4.3 STREET ADDRESS	P.O. Box 1252 N/A		
CITY-ST-ZIP	LAKELAND FL			4.4 CITY-ST-ZIP	Mulberry Fl 33860		
TITLE	D	☒ DELETE		5.1 TITLE	3rd Vice Commander	☐ Change	☒ Addition
NAME	WILLIS, ED JR			5.2 NAME	Martin D. Weeks		
STREET ADDRESS	314 SUNNYHILL LANE			5.3 STREET ADDRESS	1731 Huntington St.		
CITY-ST-ZIP	LAKELAND FL 33803			5.4 CITY-ST-ZIP	Lakeland FL 33801		
TITLE		☒ DELETE		6.1 TITLE		☐ Change	☒ Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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 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.

CR2E037 (9/96)