## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMET F STATE Sandra B. Mortham 🚁 .

Secretary of State **DIVISION OF CORPORATIONS** 

1997 DOCUMENT #
1. Corporation Name

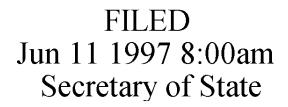
N49668

(9)

MULBERRY MEMORIAL POST 72 AMERICAN LEGION INC.

L. CHI	Cipai	riace ur	Dusiness
PΛ	RAY	217	

Mailing Address





This is a second of the second																
P.O. BOX 217 MULBERRY FL 33860-0217				P.O. BOX 217 MULBERRY FL 33860-0217												
									3. Date Incorporated o 07/01/1992	r Qualified	3a. Date of Last Report 02/01/1996					
-	Principal P	ncipal Place of Business			- ⊢	2a. Mailing Address				4. FEI Number 59-2335319			h	Applied For		
21	Suite, Apt.	Apt. #. etc.				Suite, Apt. #, etc.					<del> </del>			Not Applicable  Additional		
22					2	27					5. Certificate of Status	Desired			Required	
	City & State	ale				City & State				6. Election Campaign F Trust Fund Contribut	-	\$5.00 May Be Added to Fees				
23	Zip	28 Country Zip Count			untry			This corporation has								
24			25			29	•	30	•			Florida Statutes		Yes [		3. 133.032,
		9. Name	and	Address of C	urrent Re	gle	slered Agent		I			10. Name and Address	of New Reg	Istered A	gent	
		•							81	Name	Ed	Willis Jr.				1
	SMITH,								82	Street	Addres	s (P.O. Box Number is N	ot Acceptabl	e)		
		ENVIEW L							83		314	Sunnyhill	Ln.			
LAKELAND FL 33813								03								
	•								84	City	T - 1			FL		p Code
11	. Pursuant i	to the provis	ions	of Sections 61	7.050 <b>%</b> an	nd 6	S17 1508, Florida Stat	utes, the a	bove	a-named	COLDOI	<b>celand</b> ation submits this statem	ent for the pu			3803
l	office or r	egistered ac	jent,	or both, in the	State of F	lori	da. Such change was	s authorize	d by	the corp	poration	ation submits this statem is board of directors. I h	ereby accept	the appo	intment a	as registered
l	GNATURE _	60		1 holes		15 0	n, 360000 0 17:0003, i	i ionua sia	iluiba	<b>)</b> .			H.	25.	アフ	
3	SNATORE (	Signature, typed	or pri	nted name of regist	ud agent and	d tilk	e II applicable. (No	OTE: Register	d Age	nt signature	required	when reinstating)		DATE		
12				OFFICER	S AND DI	RE		13.			0	ADDITIONS/CHANGE	S TO OFFICE			
TIT		D D		. OFT			DELETE	1.11		1	Cor	mander		l	Change	B Addition
NA:		PETRAI							AME		Ed	Willis Jr				1
	REET ADDRESS	LAKELA		KWOOD DR						ADDRESS	314	Sunnyh <u>i</u> ll	Lane			
TIT	Y-ST-ZIP	D	HIL	1 1-			DELETÉ	2.11	HTY - ST	1-2112	,	eland FL			Change	Addition
NA.		SMITH, PERRY J.					~		IAME	[		nance Office ne Langdale		•		<i>- 7</i>
ST	REET ADDRESS	AAAA AA MAA MAAAAAAAA						2.3 9	TREET	ADDRESS	164	7 Mahaffey	-			
CIT	Y-ST-ZIP	LAKELA	ND	FL				2. 4	CITY-S	ST-ZIP		_	33811			
TIT	LE	D					<b>∑</b> DELETE	3.11	ITLE	14	1st	Vice Comma	ander	l	Change	e Addition
l	AME SMITH, SARAH						1	IAME		Bet	ty Brooks 3 Kyle St.					
ı	REET ADDRESS			VIEW LN						ADDRESS			33801			
CIT	Y-ST-ZIP	<u>LAKELA</u>	ND	rl			DELETE	3,4. 4,1 1	CITY-S	ST-ZIP	7	·			Change	e X Addition
NA	i	MITCHE	1 I	JERRY			SA PECETE	- 1	NAME	- 1		l Vice Comma J. Lane	nder	. '	Onling	A Addition
l	REET ADDRESS			RON DR						ADORESS		Box 1252	_ <i>N/I</i>	9		
	Y-ST-ZIP	LAKELA					•		ATY-S				33860			_
TIT		D	7,14	· <del>-</del> ,			(X) DELETE	5.11			n.—			- 1	Change	e X Addition
NA	ME	WILLIS,					•	5.21	IAME	1		l Vice Comna tin D. Weel				•
STI	REET ADDRESS			HILL LANE				5.3 9	TREET	ADDRESS						
	Y-ST-ZIP	LAKELA	ND	FL 33803			<del>/</del>		HTY-S	1-21P	Lák	e <sub>1</sub> Hyntipgte	148gt.			
	Œ ¹						DELETE	6.11						1	Change	e Addition
ı	ME							1	IAME							
	REET ADDRESS							1		ADDRESS						
CIT	Y-ST-ZIP			- <del> </del>				6.4 (	HTY-S	T- <i>Ž</i> IP	<u> </u>					

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.