

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001210

FILED
Apr 17, 2009
Secretary of State

Entity Name: KEY BISCAYNE AMERICAN LEGION POST NO. 374, INC.

Current Principal Place of Business:

155 OCEAN LANE DRIVE, APT. 509
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

AMERICAN LEGION POST 374
P.O. BOX 374
KEY BISCAYNE, FL 33149 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIED, MORTIMER ESQ.
291 HARBOR COURT
KEY BISCAYNE, FL US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CROMARTIE, RICHARD L
Address: 155 OCEAN LANE DRIVE, APT. 509
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DVP () Delete
Name: GRAHAM, RICHARD
Address: 700 ALLENDALE RD
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: KING, MICHAEL
Address: 745 FERNWOOD ROAD
City-St-Zip: KEY BISCAYNE, FL 33149

Title: PD () Delete
Name: SCHMACHTENBERG, LEE C
Address: 1533 SUNSET DR, STE. 201
City-St-Zip: MIAMI, FL 331436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SERGEI M KOWALCHIK

TREA

04/17/2009

Electronic Signature of Signing Officer or Director

Date