2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2003 8:00 am
Secretary of State
01-24-2003 90065 034 ****61.25

DOCUMENT # N99000000095

1. Entity Name
AMERICAN LEGION OF SOUTHWEST FLORIDA POST 90, INC.

Principal Place of Business	Mailing Address
P.O. BOX 100395 CAPE CORAL FL 33904	P.O. BOX 100395 CAPE CORAL FL 33904

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
4720 SE 15th Ave	
Suite, Apt. #, etc.: 120	Suite, Apt. #, etc.
City & State: Cape Coral Fl	City & State
Zip: 33904 Country: Lee	Zip Country

4. FEI Number 65-1083313 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FLANAGAN, JOHN J 715 S.E. 46TH TERR CAPE CORAL FL 33904	Name: Augie Agostino Street Address (P.O. Box Number is Not Acceptable): 1649-B Edith Esplanade City: Cape Coral FL Zip Code: 33904

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: Augie Agostino VCO - Adjutant — DATE: 1/6/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD BURNS, JOHN D 1746 BEACH PKWY CAPE CORAL FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD DISANTIS, D. DANIEL 1127 S.E. 36TH TERR CAPE CORAL FL 33904	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCO. Augie Agostino 1649 - B Edith Esplanade Cape Coral, Fl 33904 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2VCD ROSS, BENJAMIN H 1122 S.E. 23RD AVE CAPE CORAL FL 33990	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FOD FLANAGAN, JOHN J 715 S.E. 46TH TERR CAPE CORAL FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E037 (10/02)

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: Augie Agostino SIGNATURE REQUIRED — 1/6/03 — 239 540-8128