

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715407

Entity Name: NEWBERRY POST NO. 149, THE AMERICAN LEGION,
DEPARTMENT OF FLORIDA**Current Principal Place of Business:**26821 W NEWBERRY ROAD
NEWBERRY, FL 32669**Current Mailing Address:**PO BOX 1
NEWBERRY, FL 32669 US**FEI Number: 59-6200333****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JARVIS, CHARLES
8860 SE 64TH ST
NEWBERRY, FL 32669 US*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

Officer/Director Detail :

Title	C
Name	FIDLER, CHARLES B
Address	26003 NW 122ND AVENUE
City-State-Zip:	HIGH SPRINGS FL 32643

Title	VST
Name	JARVIS, CHARLES E
Address	8860 SE 64TH STRETT
City-State-Zip:	NEWBERRY FL 32669

Title	OD
Name	NICKERSON, DENNIS D
Address	481 SE HAPPY VALLEY RD
City-State-Zip:	HIGH SPRINGS FL 32643

Title	V
Name	TERRY, WRIGHT EJR.
Address	3328 N.W. 245 TERRACE
City-State-Zip:	NEWBERRY FL 32669

Title	OD
Name	SABO, PETER
Address	829 NW 124 DR
City-State-Zip:	NEWBERRY FL 32669

Title	OD
Name	ASHLEY, KEVIN W
Address	25315 SW 19TH AVE
City-State-Zip:	NEWBERRY FL 32669

I hereby 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 all other like empowered.

SIGNATURE: CHARLES E JARVIS**V S T****01/24/2013**

Electronic Signature of Signing Officer/Director Detail

Date