

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000006120

**FILED**  
**Mar 20, 2014**  
**Secretary of State**  
**CC2723553202**

**Entity Name:** THE AMERICAN LEGION, SUN CITY CENTER POST NO. 246, INC.

**Current Principal Place of Business:**

1009 N PEBBLE BEACH BLVD  
SUN CITY CENTER, FL 33573

**Current Mailing Address:**

1009 N PEBBLE BEACH BLVD  
SUN CITY CENTER, FL 33573

**FEI Number: 46-0781403**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ENGLES, RONALD  
249 COURTYARD BLVD  
APT 107  
SUN CITY CENTER, FL 33573 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 CPD  
Name BARTZ, VERNON  
Address 203 CACTUSFLOWER LN  
City-State-Zip: SUN CITY CENTER FL 33573

Title VCVF  
Name BROWNING, KENNETH  
Address 15818 COLDING LOOP  
City-State-Zip: WIMAUMA FL 33598

Title PAS  
Name ENGLES, RONALD  
Address 249 COURTYARD BLVD  
APT 107  
City-State-Zip: SUN CITY CENTER FL 33573

Title TD  
Name CULLITON, III, THOMAS  
Address 1317 CRYSTAL GREENS DR  
City-State-Zip: SUN CITY CENTER FL 33573

Title D  
Name BROWNING, KENNETH  
Address 15818 COLDING LOOP  
City-State-Zip: WIMAUMA FL 33598

*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: RONALD ENGLES**

**POST ADJUTANT**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date