

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19166

**FILED**  
**Jan 08, 2017**  
**Secretary of State**  
**CC6054383927**

**Entity Name:** THE WINTER PARK MEMORIAL POST #112 AMERICAN LEGION OF FLORIDA, INC.

**Current Principal Place of Business:**

AMERICAN LEGION POST 112  
4490 N. GOLDENROD RD  
WINTER PARK, FL 32792

**Current Mailing Address:**

P.O. BOX 910  
GOLDENROD, FL 32733

**FEI Number: 59-6136569**

**Certificate of Status Desired: No**

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

MCCORMICK, JOHN  
501 E CHURCH ST  
ORLANDO, FL 32801 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           COMMANDER/PRESIDENT  
Name           DOVER, BILLY  
Address        7640 BROKEN ARROW  
City-State-Zip: WINTER PARK FL 32792

Title           DIRECTOR  
Name           COSTELLO, TED J  
Address        11329 ALAMEDA SANDRA DRIVE  
City-State-Zip: CLERMONT FL 34711-6628

Title           DIRECTOR  
Name           MCCORMICK, JOHN  
Address        501 E CHURCH ST  
City-State-Zip: ORLANDO FL 32801

Title           FINANCE OFFICER/TREASURER  
Name           SHANNON, DYKE  
Address        108 JAMAICA DR  
City-State-Zip: COCOA BEACH FL 32931

Title           ADJUTANT/SECETARY  
Name           COLBERT, ROBERT  
Address        PO BOX 5446  
City-State-Zip: WINTER PARK FL 32792-5446

Title           VP, 1ST VICE COMMANDER  
Name           DRESS, JERRY  
Address        P.O. BOX 910  
City-State-Zip: GOLDENROD FL 32733

*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: DYKE SHANNON**

**FINANCE OFFICER**

**01/08/2017**

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

\_\_\_\_\_  
Date