FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of Sale DIVISION OF CORPORATIONS

1996

703698

(1)

DOCUMENT # HERBERT D. GIBB POST NO. 259, THE AMERICAN LEGIO ION, DEBARY, FLORIDA, INCORPORATED

ION, DEBARY, FLORIDA, INCORPORATED					
Principal Place of	f Business	Mailing Address		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1107 SHADICK DRIVE PO BOX 740613 P.O. BOX 613 ORANGE CITY FL 32774-0613			13		
ORANGE CITY FL 32774-7613		US		 Date Incorporated or Qualified 03/09/1962 	3a. Date of Last Report 02/06/1995
2. Principal Place of Business		2a. Mailing Address 26		4. FEI Number 59-6140737	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Z _{(p}	Country	Zip 3	Country] Yes ∐ No
24	g. Name and Address of Curre			10. Name and Address of New Ro	egistered Agent
1	9		81 Name		
GARCIA, A. ALBERT			82 Street Ac	Street Address (P.O. Box Number is Not Acceptable)	
, 2737 RYAN LN.			83		
DELTONA FL 32738			84 City	**************************************	85 Zip Code
				poration submits this statement for the pur oard of directors. I hereby accept the appo	FL
tamiliar witt	n, and accept the obligations of, Se	ent and title Lappicable (NOTE:	Rugistered Agent signature req	poration submits this statement for the pur oard of directors. I hereby accept the apport pured when reinstating! ADDITIONS/CHANGES TO OH	DATE
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OTT	Change Addition
TITLE .	D	DELETE	11 TITLE	PEIPERT, RICHARD	
NAME	LEIPERT, RICHARD P.		1.2 NAME 1.3 STREET ADDRESS	2610 SHEFFIELD D	R.
STREET ADDRESS	2610 SHEFFIELD DR.		1.4 CHY-ST-ZIP	DELTONA, FL. 327	38
CITY - S1 - ZIP	DELTONA FL 32738	TDELETE	2 1 TITLE	adj.	Change Addition
TITLE	D PDOMAL 11 OVD		2 2 NAME	BROWN, LLOYD W.	
NAME STREET ADDRESS	DROWN, LEGID		2 3 STREET ADDRESS	227 E. HIGHBANKS RD.	
CITY-ST-ZIP	DEBARRY FL		2 4 CITY - ST-ZIP	DeBARY, FL. 3271	3-2612
TITLE	D	DELETE	3 1 T(TLE	D	☐ Change ☐ Addition
NAME	WILKINS, LAWRENCE S		3 2 NAME	WILKINS, LAWRENC	
STREET ADDRESS	67 W HIGHBANKS RD		3 3 STREET ADDRESS	67 W. HIGHBANKS	RD.
GITY - ST - ZIP	DEBARRY FL	⊠ DELE1€	3.4 CITY - \$1 - ZIP 4.1 TITLE	DeBARY, FL. 32713	Change Addition
TITLE	SD DODEDT A	Moereic	4.1 BILE 4.2 NAME	FO RONALD SAYLOR	
NAME	SIMMONS, ROBERT A. J		4.3 STREET ADDRESS	361 W DIXSON ST.	
STREET ADDRESS	2578 HAULOVER BLVD		4.4 CITY - ST - ZIP	ORANGE CITY, FL.	32763-5857
CITY-ST-ZIP	DELTONA FL VD	DELETE	5 1 TIFLE	С	☐ Change ☐ Addition
NAME	GARCIA, ALBERT		5.2 NAME	ALBERT GARCIA	
STREET ADDRESS	2737 RYAN LANE		5.3 STREFT ADDRESS	7 2737 DYAN LANE	
CITY-ST-ZIP	DELTONA FL		5 4 CITY - S1 - 71P	DELTONA, FL. 327	738 Change Addition
0111 31-211	<u></u>	S PDELETE	6.1 TITLE	l D	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6 2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

CONRAD, WALTER

E.L. BUMGARDNER

895 SAXON BLVD