

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707602

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: D.N. MCQUEEN POST 103, THE AMERICAN LEGION, INC.

**Current Principal Place of Business:**

2101 TAYLOR ROAD  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

2101 TAYLOR ROAD  
PUNTA GORDA, FL 33950

**New Mailing Address:**

FEI Number: 59-6200903

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAKOVSKY, ARNOLD  
18626 ASHCROFT CIR  
PORT CHARLOTTE, FL 33948 US

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

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

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: MAKOVSKY, ARNOLD  
Address: 18626 ASHCROFT CIR  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: IVC ( ) Delete  
Name: BRULAND, DENNIS  
Address: 25391 RUPERT RD  
City-St-Zip: PUNTA GORDA, FL 33983

Title: 2VP ( ) Delete  
Name: VENCLIK, EMIL  
Address: 27110 JONES LOOP RD  
City-St-Zip: PUNTA GORDA, FL 33950

Title: F ( ) Delete  
Name: BOEHLER, FRED  
Address: 10303 BURNT STORE RD UNIT 166  
City-St-Zip: PUNTA GORDA, FL 33950

Title: JA ( ) Delete  
Name: HAYMANS, KENNETH  
Address: 91600 BURBT STORE RD  
City-St-Zip: PUNTA GORDA, FL 33950

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: IVC (X) Change ( ) Addition  
Name: KOOP, BILL  
Address: 134 WEST TARPON BLVD NW  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: F (X) Change ( ) Addition  
Name: DEGNAN, JOHN J  
Address: 10100 BURNT STORE RD/  
City-St-Zip: PUNTA GORDA, FL 33950

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARNOLD MAKOVSKY

COMM

01/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date