

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708964

FILED
Jan 19, 2007
Secretary of State

Entity Name: AMERICAN LEGION POST 323 OF LEHIGH ACRES, FLORIDA, INC.

Current Principal Place of Business:

1124 ASHLAR AVE.
P.O. BOX 851
LEHIGH ACRES, FL 339700851 US

New Principal Place of Business:

1124 ASHLAR AVE.
LEHIGH ACRES, FL 339700851 US

Current Mailing Address:

P O BOX 851
LEHIGH ACRES FLA, 339700851 US

New Mailing Address:

1124 ASHLAR AVE.
LEHIGH ACRES, FL 339700851 US

FEI Number: 59-1366558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, ROBERT
25 RICHMOND AVE
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

WAIDE, LES
1124 ASHLAR AVE
LEHIGH ACRES, FL 33936 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: LES WAIDE

01/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: GRIFFITHS, WILLIAM R.
Address: 1202 3RD STREET EAST
City-St-Zip: LEHIGH ACRES, FL 33972

Title: PCM () Delete
Name: REED, ROBERT R.
Address: 25 RICHMOND AVE.
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VD () Delete
Name: COINER, CHARLES E
Address: 408 LEELAND HEIGHTS BLVD
City-St-Zip: LEHIGH ACRES, FL 33436

Title: VD () Delete
Name: HALL, DEANNA M
Address: 1 PARKWOOD VILLIS CT
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: FO (X) Change () Addition
Name: LEOPOLD, RICHARD
Address: 111 DALEVIEW AVE
City-St-Zip: LEHIGH ACRES, FL 33936

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

Title: VD (X) Change () Addition
Name: CHITWOOD, HOYT
Address: 550 EMPIRE AVE
City-St-Zip: LEHIGH ACRES, FL 33936

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD LEOPOLD

FO

01/19/2007

Electronic Signature of Signing Officer or Director

Date