2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708964

FILED Jul 11, 2008 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

1124 ASHLAR AVE. 1124 ASHLAR AVE.

LEHIGH ACRES, FL 339700851 US LEHIGH ACRES, FL 33936 US

Current Mailing Address: New Mailing Address:

1124 ASHLAR AVE. 1124 ASHLAR AVE.

LEHIGH ACRES, FL 339700851 US LEHIGH ACRES, FL 33936 US

FEI Number: 59-1366558 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: FO () Delete Title: FO (X) Change () Addition
Name: LEOPOLD, RICHARD Name: KOCH, DAVE

Address: 111 DALEVIEW AVE Address: 335 BEACHWOOD AVE
City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: PCM () Delete Title: PCM (X) Change () Addition

 Name:
 REED, ROBERT R.
 Name:
 REED, ROBERT R.

 Address:
 25 RICHMOND AVE.
 25 RICHMOND AVE.

 City-St-Zip:
 LEHIGH ACRES, FL 33936
 City-St-Zip:
 LEHIGH ACRES, FL 33936 US

Title: VD () Delete Title: VD (X) Change () Addition

Name: CHITWOOD, HOYT Name: SHEDIO, MICH
Address: 550 EMPIRE AVE Address: 1124 ASHLAR AVE

City-St-Zip: LEHIGH ACRES, FL 33936 City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: VD () Delete Title: VD (X) Change () Addition

Name: HALL, DEANNA M
Address: 1 PARKWOOD VILLIS CT
City-St-Zip: LEHIGH ACRES, FL 33936

Name: HALL, DEANNA M
Address: 1 PARKWOOD VILLIS CT
City-St-Zip: LEHIGH ACRES, FL 33936 US

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: DAVE KOCH FO 07/11/2008