

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 709778

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** MIRACLE STRIP POST NO. 264, INC.

**Current Principal Place of Business:**

LEGION HALL, HWY. C393 NO.  
HWY C393  
SANTA ROSA BCH., FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

LEGION HALL, HWY. C393 NO.  
P.O. BOX 1182  
SANTA ROSA BCH., FL 32459

**New Mailing Address:**

**FEI Number:** 59-6164864

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BISHOP, VERNON R.  
BISHOP-TOLBERT ROAD  
SANTA ROSA BEACH, FL 32459 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: D  
Name: BARNARD, RALPH P  
Address: 72 SARA CIRCLE  
City-St-Zip: SANTA ROSE BEACH, FL

Title: TD  
Name: BISHOP, VERNON(FIN-OFF)  
Address: 714 BISHOP-TOLBERT RD  
City-St-Zip: SANTA ROSE BEACH, FL

Title: D  
Name: MILLER, RICHARD E  
Address: 614 KENSINGTON CT NE  
City-St-Zip: FORT WALTON BEACH, FL 32547

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: VERNON R BISHOP

TD

04/27/2010

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

\_\_\_\_\_  
Date