

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Apr 13, 2007**  
**Secretary of State**

DOCUMENT# 710200

**Entity Name:** FORT WALTON BEACH POST 235, AMERICAN LEGION, INC.**Current Principal Place of Business:**105 W. HOLLYWOOD BLVD, N.W.  
POST OFFICE BOX 1104  
FORT WALTON BEACH, FL 325484922**New Principal Place of Business:**105 W. HOLLYWOOD BLVD, N.W.  
FORT WALTON BEACH, FL 325484922**Current Mailing Address:**105 W. HOLLYWOOD BLVD, N.W.  
POST OFFICE BOX 1104  
FORT WALTON BEACH, FL 325484922**New Mailing Address:****FEI Number:** 59-1280846      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JAMES, TERRY A  
605 SHADY LANE DRIVE  
FORT WALTON BEACH, FL 32547      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:** P      ( ) Delete  
**Name:** CARPENTER, LAWRENCE E  
**Address:** 312 CARMEL DRIVE #3  
**City-St-Zip:** FORT WALTON BEACH, FL 32547**Title:** V      ( ) Delete  
**Name:** PARRISH, J  
**Address:** 111 ROBIN WOOD DR  
**City-St-Zip:** FORT WALTON BEACH, FL 32547**Title:** D      ( ) Delete  
**Name:** RAYMOND, F  
**Address:** 8 OKAHATCHEE CIR  
**City-St-Zip:** FORT WALTON BEACH, FL 32548**Title:** D      ( ) Delete  
**Name:** KARNES, DALE L  
**Address:** 18 WAYNELL CL.  
**City-St-Zip:** FORT WALTON BEACH, FL 32548**Title:** D      ( ) Delete  
**Name:** VISSER, H  
**Address:** 15 FOREST GR  
**City-St-Zip:** FORT WALTON BEACH, FL 32548**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****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: TERRY A JAMES

ADJ

04/13/2007

Electronic Signature of Signing Officer or Director

Date