FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT** #

(2)

LOFLEY HINSON POST NO 162, THE AMERICAN LEGION, DEPARTMENT OF FLORIDA, INC.

DEPARTMENT OF FLORIDA, INC.													
Principal Place	of Business	Mailing A	Mailing Address						i d i 14 0 44 04 140 0 1441 108 10 1		8 27 2 1821 3 1811 81	TI I THE I HOU	
820 SE 8TH AV DEERFIELD BEA		820 SE 8T Deerfield	H AVE.) BEACH FL 334	41-5610									
								3. Date Incorp. 04/06/	orated or Qualified 1966	3a. Da	ate of Last R 08/02/19	eport 96	
	ace of Business		2a. Mailing Address					4. FEI Number Applied For S9-6200339 Not Applied For					
Suite, Apt. :	# etc	26 Suite	Suite, Apt. #, etc.					Not Applicable S8.75 Additional					
22		27						5. Certificate o	f Status Desired		\$0.75 / Fee Re		
City & State)	City &	City & State					6. Election Car	npaign Financing		\$5.00	May Be	
23		28					Trust Fund (Contribution		Added t			
Zip	Country	Zip	h					8. This corporation has trability for intangible tax under s. 199.032, Florida Statutes Yes No					
24	9. Name and Address of Curre		[29] 30] t Registered Agent					Florida Statutes Yes No 10. Name and Address of New Registered Agent					
ļ					31	Name		10.		,			
KELLER.	ROBERT			_	32	Ctroot	٨٨٨٠٨٠	o (D.O. Poy Num	har in Not Assentable				
	14TH COURT					Sileer	Addres	dress (P.O. Box Number is Not Acceptable)					
DEERFIE	LD BEACH FL 33441			8	33								
					34	City			· · · · · · · · · · · · · · · · · · ·		85 Zip (Code	
11 Durement t	n the provisions of Sections 617.05	02 and 617 160	Elorido Ctolut	oo the ch		noniod	00000	ation cubmits this	a statement for the n	FL	f shansing it	o sociatored	
office or re	o the provisions of Sections 617.05 egistered agent, or both, in the Stat m familiar with, and accept the obli-	e of Florida, Suc	h change was a	authorized	by	the corp	ooratio	n's board of direc	statement for the pi ctors. I hereby accep	t the app	oointment as	registered registered	
	n lamiliar with, and accept the boli	gations of, section	311 6 17.030 3 , FIC	ภาษล 5เลเน	tes								
SIGNATURE _	Signature, typed or printed name of registered a	gent and blic if applica	he (NOI	Hegisterea .	Ager	nt signature	required	when reinstating)		DATE			
12.	OFFICERS AND DIRECTORS			13.				ADDITIONS/C	CHANGES 10 OFFIC	ERS AND			
TITLE	PELLED DODEDT U		☐ DELETE 1.1 ¥								Change	☐ Addition	
NAME CAREET ARROSES	KELLER, ROBERT H 124 SE 14TH COURT			1.2 NAM		. 555565							
STREET ADDRESS CITY-ST-ZIP	DEERFIELD BEACH FL				1.3 STREET ADDRESS 1.4 CITY - ST - ZIP								
TITLE	\$		X DELETE	2.1 1111		·ZIF	5				Change	Addition	
NAME	MCINTYRE, WILLIAM			2.2 NAN			KE	LLER, RO	BERT				
STREET ADDRESS	6800 NW 39TH AVENUE LO	T 362		2.3 STR	EET /	ADDRESS	12	4 SE 147	TH COURT				
CITY-ST-ZIP	COCONUT CREEK FL			2. 4 CIT	Y - \$	1 - 2(P	DE	ERFIELD	BEACH FL				
TITLE	D		X DELETE	3.1 TITL	E		D				☐ Change	X Addition	
NAME	SULLIVAN, MICHAEL	*404		3.2 NAN	1E				WIEGAND				
STREET ADDRESS	523 TIVOLI TRACE CIRCLE - DEERFIELD BEACH FL	#1U4				ADDRESS		9 NW 47					
CITY-ST-ZIP TITLE	DEENFIELD BEACH PL		DELETE	3.4. C(1		1 - 21P	DE	ERFIELD	BEACH FL	·	Change	Addition	
NAME	HANNAN, CHARLES		LM precie	4.1 111L 4. 2 NA							□ Change	Addition	
STREET ADDRESS	265 SE 10TH STREET, APT.	C11				ADDRESS							
CITY-ST-ZIP	DEERFIELD BEACH FL			4.4 CITY									
TITLE	D		DELETE	5.1 TITL							Change	Addition	
NAME	MIRON, JAMES			5.2 NAM	16								
STREET ADDRESS	814 S FEDERAL HWY			5.3 S1R	EET /	ADDRESS							
CITY-ST-ZIP	POMPANO BEACH FL		T	5.4 CITY		- 2 1P							
TITLE	P COUNTRAL CEDALD		DELETE	6.1 TILL							☐ Change	☐ Addition	
NAME	SCHUTTAK, GERALD 850 NE 48TH STREET			6.2 NAM									
STREET ADDRESS	OU NE HOIT SINCE			6.3 STR	£1 <i>1</i>	ADDRESS	1						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplieriental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

Jan 30 1997 8:00am

Secretary of State