## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 710679**

1. Entity Name

NEWMAN, DENNIS A

**BOCA RATON FL 33432** 

PD

ROSS, MIKE

820 SE 8TH AVE:

HARRYMAN, J. D

DIAMOND, CHARLES

820 SE 8TH AVE

HENNESSY, DONALD

the obligations of registered agent.

33 SE 7TH ST SUITE N

SIQNATURE .

10.

TITLE

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

NAME

TITLE

NAME

NAME

TITLE

NAME

TITLE

NAME

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

9. Election Campaign Financing Trust Fund Contribution.

Delete

Delete

Delete

Delete

☐ Delete

☐ Delete

NAME

STREET ADDRESS CITY-ST-ZIP

DEPARTMENT (	OF FLORIDA, INC.				
Principal Place of Business 820 SE 8TH AVE. DEERFIELD BEACH FL 33441		Mailing Address			
		820 SE 8TH AVE. DEERFIELD BEACH FL 33441			
2. Principal Place of Business		3. Mailing Address	<del></del>		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. N	lame and Address of Cu	rrent Registered Agent	·		

8. The above named entity submits this statement for the purpose of changing its registered office or registered

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

FILE NOW: FEE IS \$61.25

After September 10, 2003, min will be \$236.25

**DEERFIELD BEACH FL 33441** 

1166 HILLSBORO MILE #24

HILLSBORO BEACH FL 33062

265 S. FEDERAL HWY #203

DEERFIELD BEACH FL 33441

DEERFIELD BEACH FL 33441

**FILED** Jul 28, 2003 8:00 am **Secrétary of State** 

07-28-2003 90145 022 \*\*\*\*61.25

33441		•		
		)   1881  1884  144  144  144  145  145  145  145  14		ILBAL BUDUK ADBA
		CHECK HERE IF MAKING C	HANGE	S
	<del></del>	4. FEI Number 59-6200339		Applied For
				Not Applicable
Country			5. Certificate of Status Desired Fee Requ	
		7. Name and Address of New Registered Ag	ent	
	Name			
	Street A	ddress (P.O. Box Number is Not Acceptable)		
	City	FL	Zip Co	ode
g its re	gistered office o	r registered agent, or both, in the State of Florida. I am fan	niliar witi	h, and accept
Ū	·			` ,
				!
(NOTE: F	Registered Agent signal	ture required when reinstating) DATE		
i Camp	aign Financing	\$5:00 May Be Make Check I	ayabi	e to
ind Cor	ntribution.	Added to Fees Florida Departm		
	T 14	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS	INI 10
	11.	<del>,                                     </del>	Change	
	NAME	HOLT JOHN	E Change	/
	STREET ADDRESS	424 GARDENIA COURT		j
	CITY-ST-ZIP	DEERFIELD BEACH, FL 33442		
	TITLE	( V D · .	Change	Addition
	NAME	SHITH, HASON F.		-
	STREET ADDRESS	HOTOIL SE 9TH AVENUE		
	CITY-ST-ZIP	DEERFIELD BEACH, FL 33441		
	TITLE	, = -	Change	Addition
	NAME OTREET ADDRESS	PALOS, MARCE 330 SE 3RO AVENUE#C1		ì
:	STREET ADDRESS			
	■ DHY-SI-7P			
	CITY-ST-ZIP	DEERFIELD BEACH, FL 33441	Change	- FT Addition
	TITLE	DEEDFIELD BEACH, FL 33441 TD	Change	Addition
	<b></b>	DEEDFIELD BEACH, FL 33441 TD BHOLDEN, WILLIAM T.	Change	e 🗀 Addition
	TITLE NAME	DEEDFIELD BEACH, FL 33441  TD  HOLDEN, WILLIAM T.  5011 NE DNO AVE	Change	Addition
	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEEDFIELD BEACH, FL 33441  TD HOLDEN, WILLIAM T.  5011 NE JNO AVE POMPANO BEACH, FL 33064	Change	
	TITLE NAME STREET ADDRESS	DEEDFIELD BEACH, FL 33441  TD HOLDEN, WILLIAM T.  5011 NE JNO AVE POMPANO BEACH, FL 33064		
_	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEEDFIELD BEACH, FL 33441  TD HOLDEN, WILLIAM T.  5011 NE JNO AVE POMPANO BEACH, FL 33064		
	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DEEDFIELD BEACH, FL 33441  TD HOLDEN, WILLIAM T.  5011 NE JNO AVE POMPANO BEACH, FL 33064		

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment wi

SIGNATURE:

REJOHN N. HOLT 7-25-03