2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711626

FILED Jan 13, 2009 Secretary of State

Entity Name: AUGUSTUS RUSER, JR., POST NO. 273 THE AMERICAN LEGION, INC.

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

600 AMERICAN LEGION DRIVE MADEIRA BEACH, FL 33708 US

Current Mailing Address: New Mailing Address:

600 AMERICAN LEGION DRIVE MADEIRA BEACH, FL 33708 US

FEI Number: 59-0707915 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAUBERT, CLAYTON K
15666 49TH STREET
LOT 1110
CLEARWATER, FL 33762 US

HEINCHON, ROBERT L
9814 62ND TERRACE NORTH
ST. PETERSBURG, FL 33708 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: ROBERT L.: HEINCHON 01/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: () Change () Addition

Name: KOKER, DANIEL N Name:

 Address:
 11485 OAKHURST ROAD #200-214
 Address:

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:

 Name:
 LAUBERT, CLAYTON K
 Name:
 HEINCHON, ROBERT L

 Address:
 15666 49TH STREET N, LOT 1110
 Address:
 9814 62ND TERRACE NORTH

 City-St-Zip:
 CLEARWATER, FL 33762
 City-St-Zip:
 ST. PETERSBURG, FL 33708

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

 Name:
 KUBAN, KARL
 Name:

 Address:
 4545 37TH AVENUE N
 Address:

 City-St-Zip:
 ST PETERSBURG, FL 33713
 City-St-Zip:

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: ROBERT L. HEINCHON TD 01/13/2009