2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2002 8:00 am
Secretary of State
02-10-2002 90034 018 ****61.25

DOCUMENT # 716185

1. Entity Name

SEMINOLE POST NUMBER ONE HUNDRED ELEVEN (111) IN CORPORATED THE AMERICAN LEGION - DEPARTMENT OF F

Principal Place of Business	Mailing Address
6918 FLORIDA AVENUE TAMPA FL 33604	6918 FLORIDA AVENUE TAMPA FL 33604

403183

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-0911046 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MILLER SR, THOMAS A. 1105 W IDLEWILD AVE TAMPA FL 33604	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD HOLLEY, ALLEN S 6906 N WILLOW AVE TAMPA FL 33604	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C/D SEARS, BETTY B. 13105 Mike Boulevard Tampa, FL 33617	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BELCHER, FRED 45419 NORTHSHORE VILLA STREET 39 TAMPA FL 33604	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D HOLLEY, ALLEN S. 6906 N. Willow Av. Tampa, FL 33604	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD TAYLOR, J.G. JR 16113 ARMISTEAD LANE ODESSA FL 33556	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T/D TAYLOR, J.G. JR. 16113 Armistead Ln. Odessa, FL 33556	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD TAYLOR, J.G. JR 16113 ARMISTEAD LANE ODESSA FL 33556	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLAYTON, BROWN D JR 19098 W. FERN ST. TAMPA FL 33634	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALDERMAN, ROBERT A. 7608 N. Boulevard Tampa, FL 33604	☐ Change ☒ Addition

CR2E037 (9/01)

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 with an address, with all other like empowered.

SIGNATURE: J.G. Taylor Jr. REQUIRED Jan.21, 2002 813-920-6832
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #