2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 14, 2004
Secretary of State

DOCUMENT# 723156

Entity Name: RIVERA BEACH AMERICAN LEGION POST # 268

Current Principal Place of Business:

LEGION POST #268
1690 AVENUE "H" WEST
RIVIERA BEACH, FL 33404

New Principal Place of Business:

LEGION POST #268
1690 AVENUE
RIVIERA BEACH, FL 33404

Current Mailing Address:

LEGION POST #268
1690 AVENUE "H" WEST
RIVIERA BEACH, FL 33404

New Mailing Address:

LEGION POST #268
1690 AVENUE
RIVIERA BEACH, FL 33404

FEI Number: 59-6200712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THIBODEAU, DIANNE M
1134-A SUMMIT TRAIL CIR
WEST PALM BEACH, FL 33415

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: T ( ) Delete
Name: THIBODEAU, DIANNE M
Address: 1134 A SUMMIT TRAIL CIR
City-St-Zip: WEST PALM BEACH, FL 33415

Title: T ( ) Delete
Name: FOX, KATHLEEN F
Address: 1211 DOLPHIN RD
City-St-Zip: RIVIERA BCH, FL 33404

Title: T ( ) Delete
Name: GARNER, TYRUS J
Address: 712 IBIS WAY
City-St-Zip: NORTH PALM BEACH, FL 33408

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DIANNE M. THIBODEAU T 06/14/2004

Electronic Signature of Signing Officer or Director — Date