

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723156

FILED
Apr 28, 2009
Secretary of State

Entity Name: RIVERA BEACH AMERICAN LEGION POST # 268

Current Principal Place of Business:

LEGION POST #268
1690 AVENUE
RIVIERA BEACH, FL 33404

New Principal Place of Business:

Current Mailing Address:

LEGION POST #268
1690 AVENUE
RIVIERA BEACH, FL 33404

New Mailing Address:

FEI Number: 59-6200712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORGAN, TIMOTHY
237 DATE PALM DRIVE
WEST PALM BEACH, FL 33403 US

Name and Address of New Registered Agent:

ARTOLA, DONNA
1690 AVE H
RIVIERA BEACH, FL 33404 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: DONNA ARTOLA

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MORGAN, TIMOTHY
Address: 237 DATE PAIR DRIVE
City-St-Zip: WEST PALM BEACH, FL 33403

Title: T () Delete
Name: ARTOLA, DONNA
Address: 6154 SEVEN SPRINGS BL
City-St-Zip: LAKE WORTH, FL 33463

Title: A () Delete
Name: ARTOLA, DONNA
Address: 6154 SEVEN SPRINGS BL
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ARTOLA, DONNA
Address: 6154 SEVEN SPRINGS BLVD
City-St-Zip: GREENACRES, FL 33463

Title: D (X) Change () Addition
Name: RIESECKER, BARBARA
Address: 5670 36TH COURT
City-St-Zip: GREENACRES, FL 33463

Title: D (X) Change () Addition
Name: DUKES, GARY
Address: 408 YVONNE DR
City-St-Zip: WEST PALM BEACH, FL 33406

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: DONNA ARTOLA

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date