2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Nov 06, 2009 **DOCUMENT#723156** Secretary of State

Entity Name: RIVERA BEACH AMERICAN LEGION POST # 268

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

LEGION POST #268 1690 AVENUE

RIVIERA BEACH, FL 33404

New Mailing Address: Current 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 ()

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

ARTOLA, DONNA BUSBY, JOHN 1690 AVÉ H 1690 AVE H

RIVIERA BEACH, FL 33404 RIVIERA BEACH, FL 33404 US 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: JOHN F. BUSBY 11/06/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

ARTOLA, DONNA BUSBY, JOHN F Name: Name: 6154 SEVEN SPRINGS BLVD Address: 524 INLET ROAD Address:

City-St-Zip: GREENACRES, FL 33463 City-St-Zip: NORTH PALM BEACH, FL 33404

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

RIESECKER, BARBARA Name: Name: Address: 5670 36TH COURT Address: City-St-Zip: GREENACRES, FL 33463 City-St-Zip:

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

DUKES, GARY Name: Name: Address: 408 YVONNE DR Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip:

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

Name: Name: JONES, ROBERT T

3640 LAKE SHORE DRIVE Address: Address: City-St-Zip: City-St-Zip: RIVIERA BEACH, FL 33404

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 T. JONES, FINANCIAL OFFICER D, O 11/06/2009