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Jan 15 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **726033** (4)

1. Corporation Name

BRANDON AMERICAN LEGION POST 278 DEPARTMENT OF FLORIDA INC

Principal Place of Business

Mailing Address

OF FL. INC.
POST OFFICE BOX 127
VALRICO FL 33594

OF FL. INC.
POST OFFICE BOX 127
VALRICO FL 33594



3. Date Incorporated or Qualified

04/07/1973

4. FEI Number

59-6209742

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

33595-0127

25

29

33595-0127

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BRODERICK, JOSEPH F
1901 BELLSHORES RD
BRANDON FL 33511**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
MEREDITH, JOHN R.
208 LAKE PARSONS #801
BRANDON FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
BRODERICK, JOE
1901 BELLSHORES RD
BRANDON FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
JOYNER, CHARLES A
604 GAY ANN DRIVE
VALRICO, FL 00000**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
JANCO, STANLEY S.
303 TAHO LANE
VALRICO FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

NOTARIAL REQUIRED

1/5/98

(813) 651-1257

CR2E037 (10/97)