2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 24, 2004 8:00 am **Secretary of State**

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DOCUMEN	JT # 726033

1. Entity Name

BRANDO OF FLOR	ON AMERICAN LEGIO RIDA INC	N POST 278	B DEPARTME	NT								
Principal Plac 115 W CLAY BRANDON, F		OF F POS	ng Address FL. INC. T OFFICE BOX 127 RICO, FL 33594-0				800 191 1 00 11				DII Bib ii b isiri	0 1033101 01 4004
2. Principal F	Place of Business	3. Ma	iling Address									
Suite, Apt.	. #, etc.	Su	uite, Apt. #, etc.				01302004	Chg-NP	(CR2E0	37 (10/03)
City & Stat	te	Ci	ty & State				4. FEI Numbe 59-620	er 9742				Applied For Not Applicable
Zip	Country	Zi	р	Cou	intry		5. Certificate	of Status Des	sired '		\$8.75 A Fee Requ	dditional ired
	Name and Address of C	Current Register	ed Agent				7. Name and	Address of	New Regi	stered	Agent	
MEDEDIT	U JOUN BANK ASSESSED			-	Name		± ·•	مريب سياء.	ي. - ينسب			ب دود د د
8811 BAR	H, JOHN.R CIN CIRCLE W, FL 33569	~		- 35—	Street A	ddress (P	.O. Box Numbe	er is Not Acc	eptable)			 ,
	,						,		4			
					City			έ.	4	FL	Zíp Co	ode
8. The above the obligation	e named entity submits this state tions of registered agent.	ement for the purp	oose of changing its	registere	ed office or	r registere	ed agent, or bot	th, in the Stat	e of Florid	a. Iam	familiar wit	h, and accept
SIGNATURE	Signature, typed or printed name of registe	ered agent and title if ap	plicable. (NOT	E: Registered	d Agent signatu	y beriuper eru	vhen reinstating)	11	•	DATE		
SIGNATURE	Signature, typed or printed name of register 1) Filling Fee is \$61.25 Due by May 1, 2004	5	9. Election Car Trust Fund (mpaign Fi	inancing		shen reinstating) \$5.00 May B Added to Fees	de .		e checl	k payable tment of	
10.	Signature, typed or printed name of register ### Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS ####################################	ered agent and title if app	9. Election Car Trust Fund (mpaign Fi	inancing		\$5.00 May B		Florida	e checl Depar	tment of	State
10.	Filling Fee is \$61.25 Due by May 1, 2004 OFFICERS A	5	9. Election Car Trust Fund (mpaign Fi Contribution	inancing ion.		\$5.00 May B Added to Fees	ANGES TO O	Florida	e checl Depar	tment of	State IN 10
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12. I hereby certify that the information supplied with this filling 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: D. MSEADITH TO