2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726033

Name:

Address:

City-St-Zip:

P O BOX 154

LITHIA, FL 33547

FILED Feb 11, 2009 Secretary of State

Entity Name: BRANDON AMERICAN LEGION POST 278 DEPARTMENT OF FLORIDA INC

Current Principal Place of Business: New Principal Place of Business: 115 W CLAY AVE BRANDON, FL 33510 US **Current Mailing Address: New Mailing Address:** OF FL. INC POST OFFICE BOX 127 VALRICO, FL 335950127 US FEI Number: 59-6209742 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: MEREDITH, JOHN R 8811 BARCÍN CIRCLE RIVERVIEW, FL 33569 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete MEREDITH, JOHN R MEREDITH, JOHN R Name: Name: 8811 BARCIN CIRCLE Address: 8811 BARCIN CIRCLE Address: RIVERVIEW, FL 33578 City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: CREASMAN, SAMUEL Name: Address: 4618 DAVENTRY DR. Address: City-St-Zip: VALRICO, FL 335947376 City-St-Zip: Title: () Delete Title: (X) Change () Addition ORTELT, CHARLES SR Name: WILSON, RICHARD Name: 2815 LINDEN TREE ST 1337 MONTE LAKE DR Address: Address: City-St-Zip: SEFFNER, FL 33584 City-St-Zip: RIVERVIEW, FL 33596 Title: VD () Delete Title: () Change () Addition WAGNER, DANE

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN R. MEREDITH TD 02/11/2009