FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jun 20, 2001 8:00 am DOCUMENT # 726054 **Secretary of State** 1. Entity Name 06-20-2001 90010 013 ****61.25 RABE O. WILKISON POST 38, THE AMERICAN LEGION, I Principal Place of Business Mailing Address 1857 JACKSON ST P. O. BOX 0004 FT. MYERS FL 33901 FT. MYERS FL 33902-0004 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-6137069 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CREIGHTON, JOHN J 1542 RANSOM ST SUITE 31 City FORT MYERS FL 33901 Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE LD Addition CR2E037 (10/00) Delete Change ECK, MARVIN W. NAME NAME STAN HEENAN 1378 WHITE CEDAR LANE STREET ADDRESS 10040 BAYSHORE RD. STREET ADDRESS CITY-ST-ZIP N. FT. MYERS FL CITY-ST-ZIP FT. MYERS, FL. 33917 ☐ Delete TITLE ☐ Addition ☐ Change CREIGHTON, JOHN J NAME NAME STREET ADDRESS 1542 RANSOM ST STREET ADDRESS CITY-ST-7IP FT. MYERS FL CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME FRUAUFF. GUSTAVE R NAME -17810 RANCHO 78 DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP ALVA-FL-CITY-ST-ZIP TITLE 🔀 Delete TITLE ☐ Change Addition COOK, E. WILLIAM NAME NAME STREET ADDRESS 6 PINE GROVE CT. STREET ADDRESS CITY-ST-ZIP N. FT. MYERS FL CITY-ST-ZIP DV TITLE Delete TITLE ☐ Change Addition MCCREADY, LAWRENCE NAME NAME STREET ADDRESS 541 NEW YORK DR, LOT 22 STREET ADDRESS CITY-ST-ZIP FT MYERS FL 33905 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME ECK, RANDY S. NAME STREET ADDRESS 178 EVERGREEN RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP N. FT. MYERS FL

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 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 KACER SIGNATURE: V