

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2003 8:00 am
Secretary of State

08-14-2003 90069 011 ****61.25

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DOCUMENT # 735531

1. Entity Name

SMITH-KELLY AMERICAN LEGION POST NO. 100, INC.



Principal Place of Business

3627 HWY 90
MARIANNA FL 32448
US

Mailing Address

P. O. BOX 330
MARIANNA FL 32447-0330
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-6153383**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WISNIOSKI, STANLEY W JR.
2826 DILMORE RD
COTTONDALE FL 32431

Name **TOM SANSON**

Street Address (P.O. Box Number is Not Acceptable)
3284 CAVERNS RD

City **MARIANNA**

FL

Zip Code **32446**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	KENT, GENE	
STREET ADDRESS	PO BOX 273	
CITY-ST-ZIP	MARIANNA FL 32447	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SCHWENCKE, JOHN H	
STREET ADDRESS	3347 BUMP NOSE RD	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HUSTON, WALTER	
STREET ADDRESS	5060 S LAKE TRAIL	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HOLMES, EDWARD A	
STREET ADDRESS	2975 PARK STREET	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WISNIOSKI, STANLEY W JR	
STREET ADDRESS	2826 DILMORE RD	
CITY-ST-ZIP	COTTONDALE FL 32431	
TITLE	T	<input type="checkbox"/> Delete
NAME	GRAINGER, THOMAS L	
STREET ADDRESS	3264 HWY 73	
CITY-ST-ZIP	MARIANNA FL 32446	

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICK PETTIS	
STREET ADDRESS	4393 ANARLA DR	
CITY-ST-ZIP	MARIANNA, FL 32446	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TOM SANSON	
STREET ADDRESS	3284 CAVERNS RD	
CITY-ST-ZIP	MARIANNA, FL 32446	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOAN PADGETT	
STREET ADDRESS	1885 SPRING LAKE TR	
CITY-ST-ZIP	MARIANNA, FL 32448	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ARTHUR BAKER	
STREET ADDRESS	3690 BURBANK RD	
CITY-ST-ZIP	MARIANNA, FL 32446	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BILL BAULORRE	
STREET ADDRESS	P.O. Box 303	
CITY-ST-ZIP	ALFORD, FL 32420	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

516-4875
8-12-03

CR2E037 (4/03)