

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740134

FILED
Jan 09, 2009
Secretary of State

Entity Name: JOHN F. MURPHY POST 303, AMERICAN LEGION, INC.

Current Principal Place of Business:

27678 IMPERIAL SHORES BLVD
BLVD.
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 1931
BONITA SPRINGS, FL 34133 US

New Mailing Address:

FEI Number: 59-6200731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HADFIELD, WILLIAM
9818 TANYA COURT
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

HADFIELD, WILLIAM
9818 TONYA COURT
BONITA SPRINGS, FL 34135 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

01/09/2009

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HADFIELD, WILLIAM
Address: 9818 TONYA CT
City-St-Zip: BONITA SPRINGS, FL 34135

Title: C () Delete
Name: AUSTIN, RAYMOND J
Address: 2550 TRUST BLVD.
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VC () Delete
Name: MCOY, MICHAEL D
Address: 27473 PEMEAN RODE CIR
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: C (X) Change () Addition
Name: PRENTKI, ADAM A 111
Address: 9321 LAKE ABBY LANE
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VC (X) Change () Addition
Name: BERRY, LAWRENCE F
Address: 4877 REGAL DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134

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.

SIGNATURE: W.S. HADFIELD

Electronic Signature of Signing Officer or Director

ADJ

01/09/2009

Date