

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742716

FILED  
Feb 23, 2009  
Secretary of State

Entity Name: FRANK B. HUDDLESTON POST NO. 81, INC.

**Current Principal Place of Business:**

2909 S. HARBOR CITY BLVD.  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

2909 S. HARBOR CITY BLVD.  
MELBOURNE, FL 329017213 US

**New Mailing Address:**

FEI Number: 59-6153174      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WRIGHT, GARY T  
2909 HARBOR CITY BLVD  
MELBOURNE, FL 32901 US

**Name and Address of New Registered Agent:**

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:**

Title: DC ( ) Delete  
Name: CLASON, ROBERT  
Address: 2800 KENT ST N  
City-St-Zip: MALABAR, FL 32950

Title: P ( ) Delete  
Name: SAXBY, RON  
Address: 1428 PALEY CIR SE  
City-St-Zip: PALM BAY, FL 32909

Title: D2VC ( ) Delete  
Name: HALEY, JIM  
Address: 2047 BUESCHER HILL ST  
City-St-Zip: MELBOURNE, FL 32935

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FASHANO, RON  
Address: 521 PALMETTO DR.  
City-St-Zip: MELBOURNE, FL 32935

Title: D1VC (X) Change ( ) Addition  
Name: HOSLEY, FRANK  
Address: 2240 WOOD ST.  
City-St-Zip: MELBOURNE, FL 32904

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

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: RON FASHANO

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

P

02/23/2009

\_\_\_\_\_ Date