2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#745332

Apr 29, 2009 Secretary of State

Entity Name: MICHAEL J. CICERO POST #173, INC., THE AMERICAN LEGION DEPARTMENT OF FLORIDA

Current Principal Place of Business: New Principal Place of Business:

AMERICAN LEGION HOLIDAY, FL 34690 US

Current Mailing Address: New Mailing Address:

POB 3193 4550 BARTELT RD HOLIDAY, FL 34690 US

FEI Number: 59-1669242 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:

PEREGOY, DAVID

5142 CASTILE LANE
HOLIDAY, FL 34690 US

CLARK, JERRY
1839 MARY LANE
HOLIDAY, FL 34690

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: JERRY CLARK 04

TURE: JERRY CLARK 04/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: FO () Delete Title: FO (X) Change () Addition

Name: COLE, EDWARD T JR
Address: 4328-D TAHITIAN GARDENS CIRLCE

Name: STONE, JOEL F JR
Address: 5834 THRUSH DR

City-St-Zip: HOLIDAY, FL 34691 City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VD () Delete Title: () Change () Addition

 Name:
 CLARK, JERRY
 Name:

 Address:
 1839 MARY LN
 Address:

 City-St-Zip:
 HOLIDAY, FL
 City-St-Zip:

Title: VC () Delete Title: () Change () Addition

 Name:
 VENEZIA, VITO J JR
 Name:

 Address:
 3143 HOLIDAY LAKE DRIVE
 Address:

 City-St-Zip:
 HOLIDAY, FL 34691
 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: JOEL F STONE FO 04/29/2009