2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746070

FILED Jun 02, 2009 Secretary of State

Entity Name: JAMERSON-SHEFFIELD POST 91, INC., THE AMERICAN LEGION, DEPARTMENT OF FLORIDA

| Current Principal Place of Business: | | New Principal Place of Business: | |
|---|--|---|---|
| 4200 S US BELL, FL | | | |
| Current Mailing Address: | | New Mailing Address: | |
| P.O. BOX : TRENTON | 559 I, FL 32693 US | | |
| ln accordan | : 59-6200732 | | |
| WHITE, LE 9350 NW 1 BRANFOR | | | |
| | named entity submits this statement for the purpose e of Florida. | of changing | its registered office or registered agent, or both, |
| SIGNATUF | RE: | | |
| | Electronic Signature of Registered Agent | | Date |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | |
| Title: Name: Address: City-St-Zip: | D () Delete WHITE, LEEMAN 9350 NW 1ST AVE BRANFORD, FL 32008 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | VPD () Delete DAVIS, PAUL F PO BOX 724 OLD TOWN, FL 32680 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | ADJ () Delete MOYER, KEVIN 1059 SW 70TH AVE BELL, FL 32619 | Title: Name: Address: City-St-Zip: | ADJ (X) Change () Addition MINTON, WAYNE 3969 SW 56TH TRAIL TRENTON, FL 32693 |
| Title: Name: Address: City-St-Zip: | FO () Delete CINTRON, JOSE F PO BOX 1417 TRENTON, FL 32693 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | PCD () Delete MCKINNEY, SHELBY F 7950 NW 167TH PL FANNING SPRINGS, FL 32693 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | H () Delete WILLIAMS, MARILYN K 12151 NW 167TH PL TRENTON, FL 32693 | Title: Name: Address: City-St-Zip: | H (X) Change () Addition HOWELL, JOHN 8251 NW 172ND LLN FANNING SPRINGS, FL 32693 |
| | | | |

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: JOSE F. CINTRON FO 06/02/2009