

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

0003613

DOCUMENT # 746070

1. Entity Name
**JAMERSON-SHEFFIELD POST 91, INC., THE AMERICAN L
EGION, DEPARTMENT OF FLORIDA**



FILED

03 SEP 30 AM 8:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

4200 S US 129
BELL FL 32619
US

Mailing Address

P.O. BOX 559
TRENTON FL 32693
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-6200732**

Applied For
Not Applicable

Zip Country Zip Country

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

**CLIFTON, WILLIAM O.
505 SW 1ST ST
TRENTON FL 32693**

Name

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

City

FL

Zip Code

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 reappointing)

100023360131

09/26/03-01044-003 ***\$61.25

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 **D** ☐ Delete
NAME **CLIFTON, WILLIAM O**
STREET ADDRESS **505 SW 1 ST**
CITY-ST-ZIP **TRENTON FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PCD** ☒ Delete
NAME **EVIRS, FRED H**
STREET ADDRESS **14590 NW 72ND TR.**
CITY-ST-ZIP **TRENTON FL 32693**

TITLE **PCD** ☐ Change ☐ Addition
NAME **Geoff Robinson**
STREET ADDRESS **6100 NW 50TH ST**
CITY-ST-ZIP **Bell FL 32619**

TITLE **ADJ** ☒ Delete
NAME **KOONTZ, JERRY**
STREET ADDRESS **17590 NW 71 ST AVE**
CITY-ST-ZIP **TRENTON FL 32693**

TITLE **ADJ** ☐ Change ☐ Addition
NAME **Marilyn K Williams**
STREET ADDRESS **2151 NW 167TH PL**
CITY-ST-ZIP **TRENTON, FL 32693**

TITLE **FO** ☒ Delete
NAME **GILLIAM, JOE**
STREET ADDRESS **1760 NW 22ND CT**
CITY-ST-ZIP **BELL FL 32619**

TITLE **FO** ☐ Change ☐ Addition
NAME **Major Stroupe**
STREET ADDRESS **Major 10150 NE 35TH ST**
CITY-ST-ZIP **Branson, FL 32621**

TITLE **D** ☒ Delete
NAME **BRIDESON, WILLIAM J.**
STREET ADDRESS **P.O. BOX 938 N/A**
CITY-ST-ZIP **TRENTON FL 32693**

TITLE **D** ☐ Change ☐ Addition
NAME **FRED H EVIRS**
STREET ADDRESS **14590 NW 72ND TER**
CITY-ST-ZIP **Trenton, FL 32693**

TITLE **VPD** ☒ Delete
NAME **WILLIAMS, MARILYN**
STREET ADDRESS **2151 NW 167TH PL**
CITY-ST-ZIP **TRENTON FL 32693**

TITLE **VPD** ☐ Change ☐ Addition
NAME **RONALD W GRAVELY**
STREET ADDRESS **Grandly 7680 SE 79TH LN**
CITY-ST-ZIP **TRENTON, FL 32693**

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

Marilyn Williams

352-463-7031 9-20-2003

CR2E037 (4/03)

Division of Corporations
Uniform Business Report Filings
P O Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

Please accept my appology for the tardieness of this report. We thought it had been handled by our elected post adjutant, he recently has suffered a breakdown from prostrate cancer and PTSD.

In going through his paper work we found the report, getting it out right away.

With deepest apolloigies please find the encolosed report and our check in the amount of \$61.25.

Please inform me if there is a balancee due.

FOR GOD AND COUNTRY

Acting Post Adjutant

Marilyn Williams
Marilyn Williams

P O Box 559 Trenton, FL

Ph. 352-463-7031