

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 746311

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Entity Name:** NEW SMYRNA POST NO. 17, AMERICAN LEGION, DEPARTMENT OF FLORIDA, A CORPORATION

**Current Principal Place of Business:**

619 CANAL ST  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

619 CANAL ST  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

**FEI Number:** 59-1985128

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAMPSON, STEVEN  
3231 UMBELLA TR, DR  
EDGEWATER, FL 32141 US

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

SAMPSON, STEVEN  
619 CANAL ST  
NEW SMYRNA BEACH, FL 32168 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: STEVE SAMPSON

03/10/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD  
Name: ROMANIELLO, PETER  
Address: 619 CANAL ST  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: FO  
Name: SAMPSON, STEVEN  
Address: 619 CANAL ST  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: VCD  
Name: CUCINITTI, GARY  
Address: 619 CANAL ST  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby 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 all other like empowered.

SIGNATURE: STEVE SAMPSON

FO

03/10/2010

Electronic Signature of Signing Officer or Director

Date