2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748077

FILED Feb 09, 2009 Secretary of State

Entity Name: TRI-CITY POST NO. 18, THE AMERICAN LEGION, INC. **Current Principal Place of Business: New Principal Place of Business:** 401 E JOHNSON ST 401 E JOHNSON ST PO BOX 1502 WILDWOOD, FL 34785 WILDWOOD, FL 34785 **New Mailing Address: Current Mailing Address:** 401 E JOHNSON ST PO BOX 1502 WILDWOOD, FL 34785 FEI Number: 59-2377892 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: HILL, CHARLES E HILL, CHARLES E DIR 401 É JOHNSON ST 401 É JOHNSON ST WILDWOOD FL, FL 34785 WILDWOOD, FL 34785 US 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: CHARLES E. HILL 02/09/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HILL, CHARLES E Name: Name: 401 E JOHNSON ST Address: Address: City-St-Zip: WILDWOOD, FL 34785 City-St-Zip: Title: Title: () Delete () Change () Addition Name: FORT, ROY T. Name: Address: S.R. 44 Address: City-St-Zip: LAKE PANAFOFFKEE, FL City-St-Zip: Title: () Delete Title: () Change () Addition CURRY, DONALD E Name: Name: Address: CR 462 Address: City-St-Zip: WILDWOOD, FL City-St-Zip: Title: PD () Delete Title: () Change () Addition CLAUSE, CLYDE L Name: Name: Address: CR 217 Address: City-St-Zip: WILDWOOD, FL 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: CHARLES E. HILL TD 02/09/2009