## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#760829** 

FILED Apr 19, 2007 Secretary of State

Entity Name: ESCAMBIA POST 340, INCORPORATED, THE AMERICAN LEGION, DEPARTMENT OF FLORIDA

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

8890 ASHLAND AVENUE PENSACOLA, FL 32534

Current Mailing Address: New Mailing Address:

8890 ASHLAND AVENUE PENSACOLA, FL 32534

FEI Number: 59-1789782 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

STURGEN, WILLIAM M JR 2253 COUNTRY PLACE CIRCLE PENSACOLA, FL 32534 US

**OFFICERS AND DIRECTORS:** 

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:

Electronic Signature of Registered Agent Date

## Electronic Signature of Registered Ag

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: CO ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WILHITE, DAVID
 Name:

 Address:
 1032 FLORIDA DR
 Address:

 City-St-Zip:
 PENSACOLA, FL 32514
 City-St-Zip:

Title: VC ( ) Delete Title: SO (X) Change ( ) Addition Name: DAVIS, CARL Name: DAVIS, CARL

Address: 721 BARKSDALE ST Address: 721 BARKSDALE ST
City-St-Zip: PENSACOLA, FL 32514 City-St-Zip: PENSACOLA, FL 32514

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

 Name:
 DAVIS, MARTHA
 Name:
 DAVIS, MARTHA

 Address:
 BARKSDALE ST
 Address:
 BARKSDALE ST

 City-St-Zip:
 PENSACOLA, FL 32514
 City-St-Zip:
 PENSACOLA, FL 32514

Title: S/T ( ) Delete Title: H (X) Change ( ) Addition

 Name:
 SMITH, LAMAR
 Name:
 SMITH, LAMAR

 Address:
 6415 MEADOW FIELD CIR
 Address:
 6415 MEADOW FIELD CIR

 City-St-Zip:
 PENSACOLA, FL 32526
 City-St-Zip:
 PENSACOLA, FL 32526

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID WILHITE CO 04/19/2007