

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 13, 2008 8:00 am**  
**Secretary of State**

03-13-2008 90032 011 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                              |                                                                                                                 |                                                                                                                                                                                                                     |                                                                            |                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # 761456</b><br>1. Entity Name<br><b>AMERICAN LEGION CLUB OF BOYNTON, FLORIDA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                              |                                                                                                                 |                                                                                                                                                                                                                     |                                                                            |                                                                              |
| Principal Place of Business<br><b>571 WEST OCEAN AVE<br/>BOYNTON BEACH FL 33426<br/>US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                              |                                                                                                                 | Mailing Address<br><b>PO BOX 1018<br/>BOYNTON BEACH FL 33425<br/>US</b>                                                                                                                                             |                                                                            |                                                                              |
| 2. Principal Place of Business - No P.O. Box #<br>Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                              |                                                                                                                 | 3. Mailing Address<br>Suite, Apt. #, etc.                                                                                                                                                                           |                                                                            |                                                                              |
| City & State<br>Zip Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                              |                                                                                                                 | City & State<br>Zip Country                                                                                                                                                                                         |                                                                            |                                                                              |
| 4. FEI Number<br><b>59-6200730</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                              |                                                                                                                 |                                                                                                                                                                                                                     | Applied For<br><input type="checkbox"/> Not Applicable                     |                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                              |                                                                                                                 |                                                                                                                                                                                                                     | 1st MOORE CR2E037 (10/07)                                                  |                                                                              |
| 6. Name and Address of Current Registered Agent<br><b>BUCKNER, DAVID W<br/>115 W OCEAN AVE<br/>BOYNTON BEACH FL 33426</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                              |                                                                                                                 | 7. Name and Address of New Registered Agent<br>Name <b>FULLER, DARREL C.</b><br>Street Address (P.O. Box Number is Not Acceptable) <b>213 SW. 14TH STREET</b><br>City <b>BOYNTON BEACH</b> FL Zip Code <b>33426</b> |                                                                            |                                                                              |
| 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.<br>SIGNATURE <i>[Signature]</i> DATE <b>2-25-08</b><br><small>(NOTE: Registered Agent signature required with filing.)</small>                                                                                                                                                                                                                                                                                 |                                                                              |                                                                                                                 |                                                                                                                                                                                                                     |                                                                            |                                                                              |
| FILE NOW: FEE IS \$61.25<br>Due By May 1, 2008                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                              | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |                                                                                                                                                                                                                     | Make Check Payable to<br>Florida Department of State                       |                                                                              |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                              |                                                                                                                 | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10                                                                                                                                                               |                                                                            |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | P<br>BUCKNER, DAVID W<br>115 W OCEAN DR<br>BOYNTON BEACH FL 33426            | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | P<br>FULLER, DARREL C.<br>213 SW. 14TH STREET<br>BOYNTON BEACH, FL. 33426  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VP<br>FULLER, DARREL C<br>213 SW 14TH STREET<br>BOYNTON BEACH FL 33426       | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | VP<br>MITCHLER, LARRY J.<br>4091 N. SHADY LANE<br>BOYNTON BEACH, FL. 33436 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | S<br>BUSCO, PAUL J JR<br>904 DREW STREET<br>LANTANA FL 33462                 | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | D<br>BROWN, JACK<br>53007 DEL REO BAY<br>BOYNTON BEACH, FL. 33436          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>NEMES, WILLIAM K<br>10760 ROYAL CARIBBEAN CIR<br>BOYNTON BEACH FL 33437 | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | VP<br>EVANS TERRY L.<br>507 W. PINE AVE APT # 2<br>LANTANA, FL. 33462      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VP<br>MITCHLER, LARRY J<br>4091 N SHADY LN<br>BOYNTON BEACH FL 33436         | <input type="checkbox"/> Delete                                                                                 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                      | T<br>WEIS, FREDERICK W<br>17011 GRAND TERR BAY<br>BOYNTON BEACH FL 33436   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>[Signature]</i> DATE <b>2-23-08</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                              |                                                                                                                 |                                                                                                                                                                                                                     |                                                                            |                                                                              |

561-281-8454