

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769153

FILED
Jan 10, 2009
Secretary of State

Entity Name: FRANK MARSTON POST 33, INCORPORATED, THE AMERICAN LEGION, DEPARTMENT OF FLORIDA

Current Principal Place of Business:

1401 W INTENDENCIA ST.
PENSACOLA, FL 325937504

New Principal Place of Business:

Current Mailing Address:

P O BOX 504
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 59-6200799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURLESON, DOUGLASS M
1725 E CERVANTES ST
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: RIDDLES, PAUL D
Address: 4695 DURHAM DR
City-St-Zip: PENSACOLA, FL 32526

Title: FO () Delete
Name: BURLESON SR, DOUGLASS M
Address: 1725 E CERVANTES ST
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: PELS, ED
Address: 2510 W JACKSON ST
City-St-Zip: PENSACOLA, FL 32505

Title: D () Delete
Name: BREEZE, BERNARD
Address: 33 ADKINSON DR
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: FOREHAND, CHARLES D
Address: 3211 PATRICIA DR
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: FO (X) Change () Addition
Name: BURLESON SR, DOUGLASS M SR.
Address: 1725 E CERVANTES ST
City-St-Zip: PENSACOLA, FL 32501

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DOUGLASS M BURLESON SR

MANA

01/10/2009

Electronic Signature of Signing Officer or Director

Date