

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006025

FILED
Sep 14, 2006
Secretary of State

Entity Name: CALHOUN COUNTY AMERICAN LEGION POST 272, INCORPORATED

Current Principal Place of Business:

18838 HWY. 20 WEST
POST OFFICE BOX 906
BLOUNTSTOWN, FL 32424

New Principal Place of Business:

Current Mailing Address:

CALHOUN COUNTY AMERICAN LEGION
POST OFFICE BOX 906
BLOUNTSTOWN, FL 32424

New Mailing Address:

FEI Number: 59-3604822 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MEARS, JR., STEVE
20472 NE BRIDGES AVE.
BLOUNTSTOWN, FL 32424 US

Name and Address of New Registered Agent:

BAILEY, JR, CLYDE T
20767 SE RAY AVE.
BLOUNTSTOWN, FL 32424 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: CLYDE T. BAILEY JR

09/14/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: FOXWORTH, JERRY
Address: FOXWORTH LANE
City-St-Zip: MARIANNA, FL 32424

Title: PD () Delete
Name: MEARS, JR., STEVE G
Address: 20472 NE BRIDGES AVE.
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VPD () Delete
Name: HUNT, JIM
Address: 12432 NW MILLER
City-St-Zip: BRISTOL, FL 32321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: JOHNSTON, CHARLES W
Address: 15297 NW J.W. RACKLEY RD.
City-St-Zip: ALTHA, FL 32421

Title: PD (X) Change () Addition
Name: BAILEY JR, CLYDE T
Address: 20767 SE RAY AVE.
City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VPD (X) Change () Addition
Name: MEARS, SR, STEVE G
Address: 15837 SW FAIRCLOTH ROAD
City-St-Zip: BLOUNTSTOWN, FL 32424

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: CHARLES W. JOHNSTON

STD

09/14/2006

Electronic Signature of Signing Officer or Director

Date