

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 12, 2005
Secretary of State**

DOCUMENT# N03000000828

Entity Name: GREENVILLE POST 0131, THE AMERICAN LEGION, DEPARTMENT OF FLORIDA, INC.

Current Principal Place of Business:

P.O.BOX 177
GREENVILLE, FL 32331

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 177
GREENVILLE, FL 32331

New Mailing Address:

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

Name and Address of Current Registered Agent:

SPRADLEY, JAMES
501 E 7TH ST
GREENVILLE, FL 32331 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: DC () Delete
Name: SPRADLEY, JAMES
Address: P.O.BOX 369
City-St-Zip: GREENVILLE, FL 32331

Title: DFO () Delete
Name: CRYMES, RUFUS
Address: RT 2 BOX 59G
City-St-Zip: GREENVILLE, FL 32331

Title: D () Delete
Name: BEDELL, DENNIS J
Address: 240 SMOKEHOUSE WAY
City-St-Zip: GREENVILLE, FL 32331

Title: DC () Delete
Name: MELVIN, HERMAN D
Address: P.O.BOX 142
City-St-Zip: GREENVILLE, FL 32331

Title: D () Delete
Name: SCOTT, ROY W
Address: RT 2 BOX 60
City-St-Zip: GREENVILLE, FL 32331

Title: D () Delete
Name: BROWN, BOBBY J
Address: RT 2BOX 194
City-St-Zip: GREENVILLE, FL 32331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: JAMES SPRADLEY

DC

01/12/2005

Electronic Signature of Signing Officer or Director

_____ Date