


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # N03000000983	
1. Entity Name THE AMERICAN LEGION OF MIAMI BEACH, POST 85, INC.	

Principal Place of Business 949 PENNSYLVANIA, APT. 206 MIAMI BEACH, FL 33139-5422	Mailing Address 949 PENNSYLVANIA, APT. 206 MIAMI BEACH, FL 33139-5422
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04292005 No Chg-NP CR2E037 (10/03)

4. FEI Number 20-0565285	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  CHU, CASEY C 100 S.E. 2ND ST., 18TH FLOOR MIAMI, FL 33131
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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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD DONELIN, JIM 949 PENNSYLVANIA, APT. 206 MIAMI BEACH, FL 331395422
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WOLFF, GERALD S 4635 ALTON RD. MIAMI BEACH, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CHU, CASEY C 1521 LENOX AVE., APT. 109 MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REIS, HARRY 100 BAYVIEW DR., APT. 1511 SUNNY ISLES BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCK, LOUIS 20757 N.W. 9TH CT., APT. 208 NORTH MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMON, MICHAEL 5570 LA GORCE DR. MIAMI BEACH, FL 33140

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05/05/05-80071-005 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 registrant 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: CASEY C. CHU 4/29/05 789-9200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #