

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03968

FILED
Jan 29, 2009
Secretary of State

Entity Name: FLORIDA AMERICAN LEGION BOYS' STATE, INC.

Current Principal Place of Business:

1912-A LEE RD
ORLANDO, FL 32810 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 547859
ORLANDO, FL 328547859 US

New Mailing Address:

FEI Number: 59-2996766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDANIEL, MICHAEL R
1912-A LEE RD
ORLANDO, FL 32810 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: ST () Delete
Name: MCDANIEL, MICHAEL R
Address: 1912-A LEE RD
City-St-Zip: ORLANDO, FL 32810 US

Title: C () Delete
Name: POST, HORACE W
Address: 104 MAGNOLIA DRIVE
City-St-Zip: LADY LAKE, FL 321593233 US

Title: D () Delete
Name: SMITH, OMER G
Address: 7 WATERMILL PL
City-St-Zip: PALM COAST, FL 321647645 US

Title: D () Delete
Name: DYKE, SHANNON
Address: 2334 RIVER TREE CIR
City-St-Zip: SANFORD, FL 327716126 US

Title: D () Delete
Name: DEEN, SISCO
Address: P.O. BOX 637
City-St-Zip: FLAGLER BEACH, FL 321360637 US

Title: D () Delete
Name: HILL, CLARENCE
Address: 2803 CHESTERBROOK CT
City-St-Zip: JACKSONVILLE, FL 32224 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: C (X) Change () Addition
Name: MARTEL, PAUL
Address: 104 MAGNOLIA DRIVE
City-St-Zip: LADY LAKE, FL 321593233 US

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 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: MICHAEL MCDANIEL

ST

01/29/2009

Electronic Signature of Signing Officer or Director

Date