2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005
Secretary of State

DOCUMENT# N04000002475

Entity Name: THE CHARLES F. HAMBLEN POST 37 AMERICAN LEGION DEPARTMENT OF FLORIDA, INC.

Current Principal Place of Business:

ONE ANDERSON CIRCLE
ST AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

ONE ANDERSON CIRCLE
ST AUGUSTINE, FL 32084

New Mailing Address:

P.O. BOX 2204
ST AUGUSTINE, FL 3285-2204

FEI Number: 59-1102200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SARTAIN, A.J.
ONE ANDERSON CIRCLE
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

SARTAIN, A.J.
P.O. 2204
ST AUGUSTINE, FL 32084 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: AJ SARTAIN 01/12/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SARTAIN, A.J.
Address: ONE ANDERSON CIRCLE
City-St-Zip: ST AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SARTAIN, A.J.
Address: P.O. BOX 2204
City-St-Zip: ST AUGUSTINE, FL 32085

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: AJ SARTAIN O 01/12/2005
Electronic Signature of Signing Officer or Director Date