

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N04000002475

**FILED**  
**Sep 26, 2011**  
**Secretary of State**

**Entity Name:** THE CHARLES F. HAMBLÉN 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:**

P.O. BOX 2204  
ST. AUGUSTINE, FL 32085

**New Mailing Address:**

**FEI Number:** 59-1102200

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GAMEL, JEFF  
ONE ANDERSON CIRCLE  
ST. AUGUSTINE, FL 32084 US

**Name and Address of New Registered Agent:**

WHITE, RICHARD L  
ONE ANDERSON CIRCLE  
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: RICHARD L WHITE

09/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WHITE, RICHARD CMDR  
Address: 43 NESMITH AVENUE  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: VP  
Name: RAYMOND, BLACKABY EXE COM  
Address: 4080 PINE RUN CIRCLE  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: SEC  
Name: MCKEEFERY, KEVIN EXE COM  
Address: 200 SUMMER BREEZE WAY APT 342  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: TREA  
Name: LANDIS, LIDIA  
Address: 12271 DEWHURST CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32218

I hereby 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 all other like empowered.

SIGNATURE: RICHARD L WHITE

P

09/26/2011

Electronic Signature of Signing Officer or Director

Date