2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2011
Secretary of State

DOCUMENT# N04000010890

Entity Name: AMERICAN LEGION ANMCGAF POST 383, INC

Current Principal Place of Business:

1297 NE 82ND AVENUE
OLD TOWN, FL 32680

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 220
OLD TOWN, FL 32680

New Mailing Address:

FEI Number: 56-2438102 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHRISTIANS, M E
115 NE 112 AVENUE
OLD TOWN, FL 32680 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: PRES
Name: BURNETT, GARY L
Address: P.O.BOX 572
City-St-Zip: OLD TOWN, FL 32680

Title: 1STV
Name: EVIRS, FRED
Address: 14590 NE 72ND TERRACE
City-St-Zip: TRENTON, FL 32693

Title: 2NDV
Name: KRUEGER, WALTER F
Address: 139 NE 818 STREET
City-St-Zip: OLD TOWN, FL 32680

Title: 3VD
Name: PAULK, LESTER
Address: P. O. BOX 873
City-St-Zip: OLD TOWN, FL 32680

Title: JA
Name: BARRON, DANIEL
Address: 633 NE 349 HWY.
City-St-Zip: OLD TOWN, FL 32680

Title: ADJ
Name: HANCOCK, JOHN
Address: 17110 SW HWY. U.S. 19
City-St-Zip: FANNING SPRINGS, FL 32693

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: M.E.CHRISTIANS FIN. 01/07/2011
Electronic Signature of Signing Officer or Director Date