
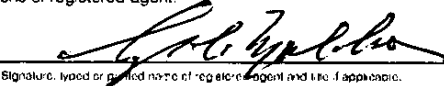
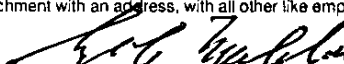


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 31, 2006 8:00 am
Secretary of State

07-31-2006 90004 040 ****61.25

DOCUMENT # N06422 1. Entity Name THE CHARLES F. THOMAS IV, POST 117, INC., THE AMERICAN LEGION, DEPARTMENT OF FLORIDA					
Principal Place of Business 189 CASSIA AVE PALM BAY, FL 32909 US			Mailing Address BOX 100278 PALM BAY, FL 32910		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 59-2417391			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent WINNIE, HARRY C 213 ALCANTARRA ST NW PALM BAY, FL 32907				7. Name and Address of New Registered Agent Name MALDONA, GEORGE C. Street Address (P.O. Box Number is Not Acceptable) 419 SAUDERS RD, SE City PALM BAY FL Zip Code 32909	
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  GEORGE MALDONA DATE 7/26/06 <small>Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when registering)</small>					
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	1VC MALDONA, GEORGE 829 BRISBANE STREET NORTHEAST PALM BAY, FL 32907	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	C MALDONA, GEORGE C. 419 SAUDERS RD, SE PALM BAY, FL 32909	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C WINNIE, HARRY 213 ALCANTARRA ST NW PALM BAY, FL 32907	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	1VC BECKHAM, DELORES L. 301 HAMMOCK RD, SE PALM BAY, FL 32909	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	2VC NASCA, SAL A 379 WILMERE AVE SW PALM BAY, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	2VC PETE GARCIA 626 STUB BRIDGE TERR, SE PALM BAY, FL 32909	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	FO CHARTIER, JOHN D JR. 3705 PONDEROSA RD MALABAR, FL 32950	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	FO RICH E. FLEMING 396 GODFREY RD, SE PALM BAY, FL 32909	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EC ELY, DOUG 1598 ASHBORD CIRCLE SOUTHEAST PALM BAY, FL 32909	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	EC BUSCH, HAROLD F 1641 ALPHA STREET NORTHEAST PALM BAY, FL 32907	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EC BUSCH, HAROLD F 1641 ALPHA STREET NORTHEAST PALM BAY, FL 32907	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	CHAIR EC CHARLES CHRISTY 298 JARO ST, NE PALM BAY, FL 32907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  GEORGE MALDONA DATE 7/26/06 321-409-0923 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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07262006 Chg-NP CR2E037 (4/06)