

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07911

FILED  
Jan 14, 2008  
Secretary of State

**Entity Name:** GEORGE P. HINTON AMERICAN LEGION POST 177 INCORPORATED

**Current Principal Place of Business:**

420 S. BURNETT RD.  
COCOA, FL 32923 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2155  
COCOA, FL 32922 US

**New Mailing Address:**

PO BOX 1202  
COCOA, FL 32923 US

**FEI Number:** 15-0403593

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONEY, JAMES A  
440 OXFORD AVE  
MERRITT ISLAND, FL 32953 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: D ( ) Delete  
Name: CONEY, JAMES A.,  
Address: 440 OXFORD AVENUE, P. O. BOX 541805 - N/A  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D ( ) Delete  
Name: HAYNES, MACK  
Address: 216 MARTIN AVE.  
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete  
Name: WILLIAMS, HUGH  
Address: P O BOX 2012  
City-St-Zip: COCOA, FL 32922

Title: D (X) Delete  
Name: BROWN, RALPH  
Address: 1213 ROSA L JONES DR  
City-St-Zip: ROCKLEDGE, FL 32955

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: BROWN, RALPH  
Address: 1213 ROSA L JONES DR  
City-St-Zip: ROCKLEDGE, FL 32955

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: JACONEY

D

01/14/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date