

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000011468

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** AMERICAN LEGION DEPT OF FL 16TH DIST INC

**Current Principal Place of Business:**

11400 CAUSEWAY BLVD  
NEW PORT RICHEY, FL 34654

**New Principal Place of Business:**

**Current Mailing Address:**

11400 CAUSEWAY BLVD  
NEW PORT RICHEY, FL 34654

**New Mailing Address:**

**FEI Number:** 27-1391564

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RICCARDO, THOMAS JR  
11400 CAUSEWAY BLVD  
NEW PORT RICHEY, FL 34654 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:** P  
**Name:** PARAPISE, GEORGE  
**Address:** 634 QUAIL KEEP DR  
**City-St-Zip:** SAFETY HARBOR, FL 34696 US

**Title:** VP  
**Name:** WING, CHARLIE  
**Address:** 2912 IMPERRIAL PALM DR  
**City-St-Zip:** LARGO, FL 33771 US

**Title:** T  
**Name:** RICCARDO, THOMAS JR  
**Address:** 11400 CAUSEWAY BLVD  
**City-St-Zip:** NEW PORT RICHEY, FL 34654 US

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:** THOMAS RICCARDO JR

RA

01/06/2011

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

\_\_\_\_\_  
Date