

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 90227 018 \*\*\*\*61.25

**DOCUMENT # N12751**

1. Entity Name

**AMERICAN LEGION POST NO 288, INC.**



Principal Place of Business

**1017 NE RAILROAD AVE  
BOYNTON BEACH FL 33435  
US**

Mailing Address

**1017 NE RAILROAD AVE  
BOYNTON BEACH FL 33435  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2589249**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CENTOLA, DAVID D  
125 HYPOLUXO ROAD  
LANTANA FL 33462**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete  
NAME **WASHINGTON, KARL**  
STREET ADDRESS **1017 NE R.R. AVENUE**  
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **D** ☐ Delete  
NAME **HAYWOOD, WALTER**  
STREET ADDRESS **305 NW 11TH AVENUE**  
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **D** ☐ Delete  
NAME **ALLEN, SYLVESTER**  
STREET ADDRESS **241 NE 13TH AVENUE**  
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **D** ☐ Delete  
NAME **DANIEL, ROBERT**  
STREET ADDRESS **123 NW 3RD AVENUE**  
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **D** ☒ Delete  
NAME **SLOAN, WILLIE**  
STREET ADDRESS **131 NW 13TH AVENUE**  
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE **D** ☒ Delete  
NAME **SIMS, GEORGE**  
STREET ADDRESS **111 NE 11TH AVENUE**  
CITY-ST-ZIP **BOYNTON BEACH FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Karl N. Washington*

*4/30/2003*

CR2E037 (10/02)