

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16930

FILED
Mar 17, 2009
Secretary of State

Entity Name: THE AMERICAN LEGION HAROLD JOHNS POST 62, DEPARTMENT OF FLORIDA, INC.

Current Principal Place of Business:

2464 VETERANS AVE
STUART, FL 34994 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2586
PALM CITY, FL 349912586 US

New Mailing Address:

FEI Number: 59-2352040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EPPOLITO, JAMES C COMMAND
1389 SW SEA HAWK WAY
PALM CITY, FL 34990 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: MAITLAND, FRANK V.C.
Address: 1115 SE ALAMANDA LN
City-St-Zip: STUART, FL 34996

Title: D () Delete
Name: NOLAN, TERRY JUDGE A
Address: 1240 STARFISH LANE
City-St-Zip: STUART, FL 34996

Title: RAD (X) Delete
Name: SALT, SHIRLEY A ADJ
Address: 4475 SE MURRY COVE CIRCLE
City-St-Zip: STUART, FL 34997

Title: D () Delete
Name: SADLER, GLEN TREAS
Address: 1454 SILVER PINE WAY
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: ANDERSON, JOSEPH ADJ
Address: 1722 SW WATERFALL BLVD.
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: HANNON, JOHN CHAPLAI
Address: 1864 PALM CITY RD.
City-St-Zip: STUART, FL 349934990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: SADLER, GLEN TREAS
Address: 1454 SILVER PINE WAY
City-St-Zip: PALM CITY, FL 34990

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

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: JAMES EPPOLITO

COMM

03/17/2009

Electronic Signature of Signing Officer or Director

Date