## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N18597

1. Entity Name

THE ORLANDO MEMORIAL POST #19, INC.

AMERICAN LEGION OF FLORIDA

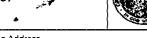
Principal Place of Business

2101 LEE ROAD ORLANDO, FL 32810

HEATH, JANINE M

10.

7747 MARIAH COURT ORLANDO, FL



Mailing Address 2101 LEE ROAD ORLANDO, FL 32810

## **FILED** Jan 24, 2005 08:00 AM **Secretary of State**



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6. Name and Address of Current Registered Apart

01072005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 59-0522999

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

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SIGNATURE		
SIGNATURE	ANOTE Residence of Associations and the design of the design of	D. T.

Filing Fee is \$61.25 Due by May 1, 2005 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

TITLE NAME HEATH, JANINE M 2075 WENTHWORTH CR STREET ACCRESS CITY - ST - ZIP APOPKA, FL 32703 mne NAME BUSBY, NORM STREET ADDRESS 8818 ELBA WAY CITY-ST-ZIP ORLANDO, FL 32810 TITLE STECKEL, JACK NAME STREET ADDRESS 2810 BERMUDA AVE N City-St-ZiP APOPKA, FL 32703 TITLE NAME CORBETT, JOHN STREET ADDRESS 1430 VALOR ST CITY-ST-ZIP ORLANDO, FL 32810 DDE NAME STREET ADDRESS

OFFICERS AND DIRECTORS

000000194420 00725705-80101-016 61.25

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12. I hereby certify that the information supplied with this filling 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 recover of 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 attachous with an address, with all other like empowered.

CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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