

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N20867

1. Entire
JANE A DELANO, Post 122, Inc
American Legion, Dept of Fla

Principal Place of Business
600 American Legion Dr.
c/o Post 273
MADIERA BEACH, FL 33708
Miami Address
P.O. Box 114
Bay Pines, FL 33744

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business
600 American Legion Dr.
Suite, Apt. #, etc.
c/o Post 273
City & State
MADIERA BEACH, FL
Zip
33708
Country
FLORIDA
American Legion Post 122
PO Box 114
Bay Pines, FL 33744

DO NOT WRITE IN THIS SPACE

4. FEI Number
35-0144250
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
Louis Coleman
400 Railroad Ave
Clearwater FL
New address:
400 Blanche Littlejohn Trail
Clearwater FL 34615-4143
7. Name and Address of New Registered Agent
Name
JOAN M. ARCANO
Street Address (P.O. Box Number is Not Acceptable)
5674 Bay Pines Lake Blvd
City
St Petersburg FL Zip Code
33708

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.
SIGNATURE
Joan M. Arcano Joan M. Arcano
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)
DATE
1/22/2000

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COMMANDER
JOAN M. ARCANO
5674 Bay Pines Lake Blvd
ST PETERSBURG FL 33708
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ADJUTANT (SEC.)
MARY E. MARKLE # 516
1547 SHORE DRIVE
ST PETERSBURG, FL 33707
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TREASURER
LOIS BRADLEY
11300 124 AVE #94
LARGO, FL 33778
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2ND VICE PRES.
MARY RYAN
34584 GARDENIA DRIVE
PINELLAS PARK FL 33781
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EXEC. AD. DIRECTOR D.
EIDA G. FLOW
2131 RIDGE RD (VIA X136)
LARGO, FL 33778-1613
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
MARIA BUTTERWORTH
9252 47th AVE No
ST. PETERSBURG FL 33708

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DIRECTOR
ALVARETTA SHAFER D.
11425 CARTERBURY RD. No.
ST. PETERSBURG FL 33710-6304
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
100003178231-0
-03/21/00-01096-015
*****61.25 *****61.25
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MARY ROMANO
(NAME change)
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SP

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: Joan M. Arcano Joan M. Arcano 1/22/2000 392-5648
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Daytime Phone #

CR2E037 (9/99)