

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90024 036 ****61.25

DOCUMENT # N22877

1. Entity Name

AMERICAN LEGION POST #95, INC.

Principal Place of Business

136 E WALL ST
P.O. BOX 357
FROSTPROOF FL 33843
US

Mailing Address

P.O. BOX 357
FROSTPROOF FL 33843
US

2. Principal Place of Business

136 E WALL ST

3. Mailing Address

P.O. BOX 357

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FROSTPROOF, FLA

4. FEI Number

59-2360714

Applied For

Not Applicable

Zip

Country

Zip

Country

33843

FLA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JAKUES, WILLIAM A.
136 E. WALL ST.
FROSTPROOF FL 33843

P.O. BOX 357

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.

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

After September 12, 2001, min. will be \$236.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BROWN, JOHN
2000 MCCLILLAN RD
FROSTPROOF FL 33843 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HASTINGS, KENNETH W.
590 W. H ST.
FROSTPROOF FL 33843 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JAKUES, WILLIAM A.
343 W. B STREET (PO BOX 357)
FROSTPROOF FL 33843 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
SULLIVAN, GUSSIE JR.
325 W. WALL ST. (PO BOX 211)
FROSTPROOF FL 33843 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COMMANDER
THOMAS EYLAND
316 E 8TH ST
FROSTPROOF, FLA 33843 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/01

836-635-31X1

CR2E037 (5/01)