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Feb 12 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N28782** (3)

1. Corporation Name

LT. COL. JOHN M. GERANT MEMORIAL POST 245, THE A  
MERICAN LEGION, DEPARTMENT OF FLORIDA, INC.

Principal Place of Business

Mailing Address

8915 OLD PINE RD.  
BOCA RATON FL 33433  
US

8915 OLD PINE RD.  
BOCA RATON FL 33433  
US

3. Date Incorporated or Qualified

10/10/1988

4. FEI Number

59-2621505

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SORSCHER, PHILIP  
8915 OLD PINE RD.  
BOCA RATON FL 33433

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME CD  
BLUMBERG, GERALD  
STREET ADDRESS 22700 VISTAWOOD WAY  
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME VP  
GOLDENBERG, JERRY  
STREET ADDRESS 21145 WHITE OAK AVE.  
CITY-ST-ZIP BOCA RATON FL

TITLE ☒ DELETE

NAME VP  
EDWARD, KLEIN  
STREET ADDRESS 22853 SW 56TH AVE  
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME T  
LESTER, EUGENE  
STREET ADDRESS 8931 SW 18TH ROAD  
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME SD  
SORSCHER, PHILIP  
STREET ADDRESS 8915 OLD PINE RD.  
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

V.P.  
NORMAN ENO  
11970 N. BRANCH Rd.  
BOCA RATON FL. 33428

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Philip Sorscher PHILIP SORSCHER

2/5/98

561 487-9491

CR2E037 (10/97)