2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 23, 2002 8:00 am **DOCUMENT # N28782** Secretary of State 1. Entity Name 01-23-2002 90039 019 ****61.25 LT. COL. JOHN M. GERANT MEMORIAL POST 245, THE A MERICAN LEGION, DEPARTMENT OF FLORIDA, INC. Principal Place of Business Mailing Address 22700 VISTAWOOD 22700 VISTAWOOD VOCA RATON FL 33428 **BOCA RATON FL 33428** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-262 1505 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) **BLUMBERG, GERALD** 22700 VISTA WOOD **BOCA RATON FL 33428** Zip Code FL 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** DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. CRAO MATTHEW ✓ Addition TITLE TITLE Delete MOGOR, JOHN 9326 KETAY CIR NAME NAME STREET ADDRESS 8392 D TRENT J STREET ADDRESS BOCK PHTON FL CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** TENO NORMAN 11970 N BRANCH Rd Addition ☐ Delete TITLE TITLE Aronin. Herb NAME NAME STREET ADDRESS 4069 YARMOUTH #B STREET ADDRESS BOCA RATON FL 33428 **BOCA RATON FL 33434** CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITL F TITLE Delete SORSCHER, PHIL NAME NAME 8915 OLD PINE RD STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP CITY-ST-7IP ADJ ☐ Addition ☐ Change TITLE TITLE ☐ Delete **BLUMBERG, GERALD** NAME NAME 22700 VISTAWOOD WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** Change ☐ Addition 💢 Delete TITLE RAO, MATTHEW NAME NAME 9326 KETAY CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33428**° CITY-ST-ZIP THE SCHUWITKER, MANTING OF 1989 N. CAMINO REAL # THIT Delete ☐ Change ☐ Addition TITLE TITLE SCHMAUCHEN, MARTIN NAME NAME

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 the and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director ared to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplemental report is of the corporation or the receiver or trustee expec changed, or on an attachment with an analysis, v expowered to exec

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

6989 N CAMINO REAL #TH117

BOCA RATON FL 33433

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

BOCA RATON FL 33433