2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34525

FILED Jan 23, 2007 Secretary of State

Entity Name: WILLIAM WEECH POST NO. 168, THE AMERICAN LEGION, INC.

Current Principal Place of Business: New Principal Place of Business:

803 EMMA ST. 803 EMMA ST.

POST OFFICE BOX 903 KEY WEST, FL 33040 KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

803 EMMA ST. POST OFFICE BOX 903 KEY WEST, FL 33040

FEI Number: 59-6200886 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PLANAS, JOSE H. 711 OLIVIA ST PLANAS, JOSE H 711 OLIVIA ST

KEY WEST, FL 33040 US KEY WEST, FL 33040 US

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: JOSE H. PLANAS 01/23/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

 Name:
 RICHARDSON, PAUL
 Name:
 RICHARDSON, PAUL

 Address:
 P O BOX 1254
 Address:
 803 EMMA STREET

 City-St-Zip:
 KEY WEST, FL 33040
 City-St-Zip:
 KEY WEST, FL 33040

Title: D () Delete Title: () Change () Addition

 Name:
 PLANAS, JOSE H.,
 Name:

 Address:
 711 OLIVIA ST.
 Address:

 City-St-Zip:
 KEY WEST, FL
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LEGGETT, SAMUEL D.,, JR.
 Name:

 Address:
 216 EANES LANE
 Address:

 City-St-Zip:
 KEY WEST, FL
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ALLEN, ALFRED A.,
 Name:

 Address:
 715 ELIZABETH ST.
 Address:

 City-St-Zip:
 KEY WEST, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL RICHARDSON D 01/23/2007