

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N36081

1. Entity Name

CHRIS GADSON POST #204, AMERICAN LEGION, INC.



Principal Place of Business

340 N CAROLINE STREET
DAYTONA BEACH FL 32114

Mailing Address

PO BOX 10362
DAYTONA BEACH FL 32120-0362



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2002450

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BEVERLY, REGINALD C
6213 KLONDIKE DR
PT ORANGE FL 32127

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-electing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DT ☐ Delete
NAME BEVERLY, REGINALD C
STREET ADDRESS 6213 KLONDIKE DR
CITY-ST-ZIP PORT ORANGE FL

TITLE DC ☐ Delete
NAME EDWARDS, CARNELL
STREET ADDRESS 340 NORTH CAROLINE ST
CITY-ST-ZIP DAYTONA BEACH FL

TITLE DE ☐ Delete
NAME STAPLES, LEROY JR.
STREET ADDRESS 624 LOOMIS AVENUE
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE D ☐ Delete
NAME MORRIS, LINDSEY
STREET ADDRESS 747 LOTUS LANE
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Add
NAME 1100000447887
STREET ADDRESS 03/08/06-80075-021 61.25
CITY-ST-ZIP

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.