

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT (AR)**

**FILED**  
**Feb 21, 2007 8:00 am**  
**Secretary of State**

02-21-2007 90027 021 \*\*\*\*61.25



<b>DOCUMENT # N37152</b>	
1. Entity Name <b>ERNEST M. SCHULTZ, III, POST NO. 351 OF THE AMERICAN LEGION, DEPARTMENT OF FLORIDA, INC.</b>	
Principal Place of Business 4800 PALM BEACH BLVD FT MYERS FL 33905 US	Mailing Address 4800 PALM BEACH BLVD FT MYERS FL 33905 US
2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State -	City & State -
Zip	Country



1st MOORE CR2E037 (10/06)

4. FEI Number <b>65-0178748</b>		Applied For
		Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent <b>CHARLES, HOPKINS M 4800 PALM BEACH BLVD FT MYERS FL 33905</b>		7. Name and Address of New Registered Agent	
		Name <b>WARBURTON, DONALD E.</b>	
		Street Address (P.O. Box Number is Not Acceptable) <b>4800 PALM BEACH BLVD.</b>	
		City <b>FT. MYERS</b>	Zip Code <b>FL 33905-3262</b>

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 Donald E. Warburton Donald E. Warburton, Treasurer 02-09-07  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT WARBURTON, DONALD E 4800 PALM BEACH BLVD FT-MYERS FL 33905 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV HOPKINS, CHARLES M 4800 PALM BEACH BLVD FORT MYERS FL 33905 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV ROSE, DAVID G. 6050 HOLSTEIN DR. FORT MYERS, FL 33905 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP EBLING, JOHN S 4800 PALM BEACH BLVD FORT MYERS FL 33905 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS URBAN, STEPHEN E JR 4800 PALM BEACH BLVD FORT MYERS FL 33905 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FENLON, JOHN 4800 PALM BEACH BLVD FORT MYERS FL 33905 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PETERS, MARTIN 4661 LAKESIDE CLUB BLVD. #1 FORT MYERS, FL 33905 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D McCLOSKEY, WAYNE 4843 NOTTINGHAM DR. FORT MYERS, FL 33905 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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.

SIGNATURE: Donald E. Warburton Donald E. Warburton 239-693-0351  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #