

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50525

FILED
Apr 23, 2012
Secretary of State

Entity Name: DOUGLAS A. MUNRO POST #356, INC., AMERICAN LEGION, DEPARTMENT OF FLORIDA

Current Principal Place of Business:

400 ABERDEEN PKWY
PANAMA CITY, FL 32405 US

New Principal Place of Business:

Current Mailing Address:

400 ABERDEEN PKWY
PANAMA CITY, FL 32405 US

New Mailing Address:

FEI Number: 59-3027253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEDY, CHARLES E BCD
2410 W 16TH ST
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

SKAGGS, FAYE FIN
606 TAMMY STREET
LYNN HAVEN, FL 32444 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: FAYE SKAGGS

04/23/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: BD
Name: SKAGGS, FRANKLIN D ADJ
Address: 606 TAMMY ST.
City-St-Zip: LYNN HAVEN, FL 32444

Title: BD
Name: HUDSON, DOUGLAS C BD
Address: 1216 ILLINOIS AVE.
City-St-Zip: LYNN HAVEN, FL 32444

Title: BM
Name: GLAZE, DAVID L BM
Address: 701 MINNESOTA AVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: BM
Name: WOODY, EDWARD G BD
Address: 1705 SUTHERLAND RD
City-St-Zip: LYNN HAVEN, FL 32444

Title: BM
Name: HANSEN, DONALD K BM
Address: 4702 GRANTS MILL DR
City-St-Zip: LYNN HAVEN, FL 32444

Title: BM
Name: SKAGGS, FAYE
Address: 606 TAMMY ST
City-St-Zip: LYNN HAVEN, FL 32444

I hereby 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 all other like empowered.

SIGNATURE: FAYE SKAGGS

BM

04/23/2012

Electronic Signature of Signing Officer or Director

Date