

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**96 APR 29 AM 8:30**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N50940**

**(8)**

1. Corporation Name  
**LEMON BAY AMERICAN LEGION POST #276, INC.**

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified  
**09/18/1992**

3a. Date of Last Report  
**03/15/1995**

2. Principal Place of Business  
21 **350 S. McCall Rd.**

2a. Mailing Address  
26 **P.O. Box 706**

4. FEI Number  
**59-6200574**

Applied For  
Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23 **ENGLEWOOD, FL**

28 **ENGLEWOOD, FL**

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip  
24 **# 34223**

Country  
25 **Sarasota**

Zip  
29 **34295-0706**

Country  
30 **Sarasota**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BRASAEMLE, R.W.  
350 S. McCall Rd.  
Englewood, FL 34223**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **Commander**  
STREET ADDRESS **Rocco Albano**  
CITY - ST - ZIP **603 Pine Needle Ln.  
Englewood, FL 34223**

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **Brasaemle, Ralph W.**  
CITY - ST - ZIP **1915 Michigan Ave.  
Englewood, FL**

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME **V**  
STREET ADDRESS **Riggs, Ransom H.**  
CITY - ST - ZIP **925 River Road S.  
Englewood, FL**

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME **T**  
STREET ADDRESS **Catlin, Donald E.**  
CITY - ST - ZIP **6358 Spinnaker Blvd.  
Englewood, FL**

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **Tannatt, Willard C.**  
CITY - ST - ZIP **11029 Vanessa  
Englewood, FL**

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

TITLE ☐ DELETE  
NAME **D**  
STREET ADDRESS **Smith, Raymond H.**  
CITY - ST - ZIP **1215 Jefferson Dr.  
Englewood, FL**

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**Donald E. Catlin 4/7/96 941.475.1452**

CR2E037 (12/95)