

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 22, 2008 8:00 am**  
**Secretary of State**

07-22-2008 90006 023 \*\*\*\*61.25

DOCUMENT # N93000000915

1. Entity Name  
 THE CHARLES L. FUTCH POST NO. 189, DEPARTMENT  
 OF FLORIDA, AMERICAN LEGION, INC.



Principal Place of Business 807 LOUISIANA AVE SEBASTIAN, FL 32958 US	Mailing Address 807 LOUISIANA AVE SEBASTIAN, FL 32958 US
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60045278



05282008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 23-7066489	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

~~MOTYKA, EDWIN J.  
4536 HUNTERS RUN CIRCLE  
GRANT, FL 32949~~

DONALD E. JUDGE  
1050 COLE TER.  
SEBASTIAN, FL 32958

**DO NOT WRITE IN THIS SPACE**

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. Judge* DATE: *July 18, 2008*

Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when consulting)

Filing Fee is \$61.25 Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MOTYKA, EDWIN 4536 HUNTERS RUN CIRCLE GRANT, FL 32949	DONALD E. JUDGE 1050 COLE TER. SEBASTIAN, FL 32958
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONG, CHARLES 485 CROTON AVENUE SEBASTIAN, FL 32958	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARQUIS, PETER L 2110 E. LAKEVIEW DR SEBASTIAN, FL 32958	GEORGE A. WESTERFIELD 291 FAITH TERRACE SEBASTIAN, FL 32958
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. Judge* Date: *July 9, 2008* Displayed Phone #: *778-388-1815*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR