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

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # N9500005034

THE ROYAL BRITISH LEGION, THE 1ST FLORIDA BRANCH

Principal Place of Business C/O MAURICE GRAHAM 331 EAST PROSPECT ROAD OAKLAND PARK FL 33334

2. Principal Place of Business

Suite, Apt. #, etc.

21

22

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

27

C/O MAURICE GRAHAM 331 EAST PROSPECT ROAD OAKLAND PARK FL 33334

## **FILED** May 03, 1999 8:00 am Secretary of State

05-03-1999 90095 036 \*\*\*\*61.25

473123-90095-36

3. Date Incorporated or Qualifed

10/23/1995

65-0637814

4. FEI Number

City & State		City & State	City & State			5. Certificate of Status Desired   58.75 Addition						
3		28								F8	e Requ	ured
Zip	· ·			intry		6. Election (	Campaign F	inancing			.00 м	
25 29 3			30			Trust Fund Contribution				Added to Fees		
	9. Name and Address of Curren	t Registered Agent		ļ.,		10. Name an	d Address	of New Re	gistered	Agent		
ì				81	Name							
GRAHAM, MAURICE					Street Addr	ress (P.O. Box N	umber is No	t Acceptat	ole)			
	PROSPECT ROAD					<u></u>		·				
	PARK FL 33334	•		83								
1.				84	City		<del></del>			85	Zip Co	de
	State of the second			1	-	·	_	. : <u> </u>	<u> </u>	. 📖		
office or r agent. I a	to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the obligations of the section of	of Florida Such change	was authorized	d by t	-named corp he corporation	oration submits to on's board of dire	this stateme ectors. I her	nt for the p eby accept	urpose of the appoi	changin ntment :	ng its re as regi	gistered stered
SIGNATURE	Signature, typed or printed name of registered ages	nt and title if applicable.	(NOTE: Registered	Agent	signature require	d when reinstating)			DATE			
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITION	S/CHANGE	S TO OFF	ICERS AN			
TITLE	P/TR	☐ DELE	TE 1.1 TI	TLE "						☐ Cha	ange	Addition
NAME	YOUNG, ALAN H		1.2 N	AME				٠				
STREET ADDRESS	70 ANN LEE LANE		1.3 S	TREET	ADDRESS		•	,	•	1,		
CITY-ST-ZIP	TAMARAC FL 33319	<u> </u>	1.4 C	11Y-ST	-ZIP							
TITLE	VSTR	☐ DELE	TE 2.1 TI	TLE	]					☐ Cha	ange -	Addition
NAME	HEATON-JONES, BRIAN		2.2 N	AME				•				
STREET ADDRESS	1453 NW 10TH STREET		2.3 \$	TREET	ADDRESS	more, more risks of	2 4.	·	* <del></del>	<u> </u>		•
CITY-ST-ZIP	DANIA FL 33004		2.40	TY-ST	- ZIP					· .		
TITLE	T/TR ·	☐ DELE	TE 3.1 TI	TLE	_				•	☐ Cha	ange	Addition
NAME	LOW, GEORGE R		3.2 N	AME	1				-			•
STREET ADDRESS	AUAL		3.3 \$	TREET	ADDRESS				•			
CITY-ST-ZIP	COCONUT CREEK FL 33066		3.4. 0	HY-ST	r-ziP		*	- i	•			
TITLE		☐ DELE	TE 4.1 T	ITLE						Cha	ange	Addition
NAME			4,21	AME	1	•			•			
STREET ADDRESS			4.3 \$	TREET.	ADDRESS	•			-			
CITY-ST-ZIP	• • • •		4.4 C	17Y-ST	-ZIP							
TITLE		☐ DELE	TE -5.1 TI	TLE				<del>,</del> .		Cha	ange	☐ Addition
NAME			5.2 N	AME		•			: *			
STREET ADDRESS			5.3 S	TREET	ADDRESS	ŕ						
CITY-ST-ZIP			5.4 C	ITY-ST	-ZIP				<u> </u>	٠.		•
TITLE		☐ DELE	TE 6.1 T	TLE				٠, ,	1	☐ Cha	ange	Addition
NAME			6.2 N	AME		•				•		
STREET ADDRESS			6.3 S	TREET.	ADDRESS		•	٠			· · ·	
J			640	ITY-ST	710	-						
CITY-ST-ZIP					-24							

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, with all other-like empowered.

SIGNATURE:

SIGNATURE

Applied For

Not Applicable