

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90003 034 ****66.25

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1. Entity Name

**ALFREDO SPENCE CORPORATION OF THE AMERICAN
LEGION POST NO. 182**

Principal Place of Business

**3523 MARLER AVENUE
MIAMI FL 33133**

Mailing Address

**3523 MARLER AVENUE
MIAMI FL 33133**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0667764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BULLARD, CYRIL A.
14410 SW 105 AVE
MIAMI FL 33176**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **V** ☐ Delete
NAME **CURRY, RICHARD**
STREET ADDRESS **3070 HIBISCUS STREET**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **PD** ☐ Delete
NAME **BULLARD, CYRIL A**
STREET ADDRESS **14410 SW 105 AVE**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **S** ☐ Delete
NAME **WHITE, DAVID A**
STREET ADDRESS **3523 MARLER AVE**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **T** ☐ Delete
NAME **WHITE, ZACHARY A**
STREET ADDRESS **3519 MARLER AVE**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **D** ☐ Delete
NAME **JOHNSON, WILLIE J**
STREET ADDRESS **3342 THOMAS AVENUE**
CITY-ST-ZIP **MIAMI FL 33133**

TITLE **D** ☐ Delete
NAME **CHRISTIE, CHARLES B**
STREET ADDRESS **6730 SW 62ND CT**
CITY-ST-ZIP **MIAMI FL 33143**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

David A. White

DAVID A WHITE

1-25-06

205 443-6520