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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000005920

1. Corporation Name

AMERICAN LEGION POST 50, INC.

Principal Place of Business

142 BOYNTON BLVD.
DAYTONA BEACH FL 32118

Mailing Address

P.O. BOX 2512
DAYTONA BEACH FL 32115-2512



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

01/01/1997

4. FEI Number

59-6200696

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

WITT, ROBERT A
142 BOYNTON BLVD.
DAYTONA BEACH FL 32118

10. Name and Address of New Registered Agent

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

TITLE PD
NAME LARE, RICHARD R LITTLE
STREET ADDRESS 809 NEW YORK AVENUE
CITY-ST-ZIP SOUTH DAYTONA FL 32119

TITLE VD
NAME BLAIS, GILLES
STREET ADDRESS 710 BOYNTON BLVD,
CITY-ST-ZIP DAYTONA BEACH FL 32116-7128

TITLE STD
NAME WITT, ROBERT A
STREET ADDRESS 142 BOYNTON BLVD
CITY-ST-ZIP DAYTONA BEACH FL 32116-7128

TITLE VD
NAME ROSENBERGER, WILLIAM
STREET ADDRESS 882 VILLAGE DRIVE
CITY-ST-ZIP ORMOND BEACH FL 32174

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE TP
1.2 NAME LITTLE, RICHARD R.
1.3 STREET ADDRESS 331 RIDGEWOOD, PO BOX 1053
1.4 CITY-ST-ZIP HOLLY HILL FL 32114-1053

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 710 MAGNOLIA AVE
2.4 CITY-ST-ZIP HOLLY HILL FL 32117

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS 1282 MONTICELLO DR
4.4 CITY-ST-ZIP DAYTONA BEACH FL 32119

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

WITT 4/20/99 904 258 6188