

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005963

FILED
Apr 07, 2006
Secretary of State

Entity Name: LANTANA MEMORIAL POST 269 INC. A.L.D. FL. AMERICAN LEGION DEPT. OF FLORIDA

Current Principal Place of Business:

418 S. DIXIE HWY
LANTANA RECREATIONAL BLDG
LANTANA, FL 33462 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3434
LANTANA, FL 33462 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTELLANO, PAT C
PO BOX 3434
418 S DIXIE
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: CASTELLANO, PAT C
Address: 5631 S 38TH CT
City-St-Zip: GREENACRES, FL 33463

Title: TEC () Delete
Name: KNAPP, ROBERT H
Address: LANTANA CASCADES
City-St-Zip: LANTANA, FL 33462

Title: T () Delete
Name: DALE, DANIEL
Address: 1114 LAKE TER. APT.202A
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Delete
Name: GRAHAM, JERRY K
Address: 7728 THORNLEE DR
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL DALE

T

04/07/2006

Electronic Signature of Signing Officer or Director

Date