


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90063 001 ****61.25

04-18-2008 90063 002 *****8.75

DOCUMENT # N99000001946					
1. Entity Name AMERICAN LEGION POST 55 INC.					
Principal Place of Business 1063 W. DESOTO STREET CLERMONT FL 34711			Mailing Address 1063 W. DESOTO STREET CLERMONT FL 34711		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 45-0504032	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCGUIRE, EDMUND F 757 PARK VALLEY CR MINNEOLA FL 34715 MINNEOLA, FL. 34715			7. Name and Address of New Registered Agent		
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 <i>Edmund F. McGuire</i> Edmund F. McGuire <i>FINANCE OFFICER</i> 04-04-2008 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
FILE NOW: FEE IS \$61.25 Due By: May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VC	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BARNETT, GARY		NAME	BARNETT, GARY	
STREET ADDRESS	1063 WEST DESOTO ST		STREET ADDRESS		
CITY - ST - ZIP	CLERMONT FL 34711		CITY - ST - ZIP		
TITLE	CD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MOOREHOUSE, ALTON		NAME		
STREET ADDRESS	1063 WEST DESOTO ST		STREET ADDRESS		
CITY - ST - ZIP	CLERMONT FL 34711		CITY - ST - ZIP		
TITLE	ADS	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCGUIRE, EDMUND F		NAME		
STREET ADDRESS	757 PARK VALLEY CR		STREET ADDRESS		
CITY - ST - ZIP	MINNEOLA FL 34715		CITY - ST - ZIP	MINNEOLA FL 34715	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FULMER, ADGER		NAME		
STREET ADDRESS	1063 W DESOTO		STREET ADDRESS		
CITY - ST - ZIP	CLERMONT FL 34711		CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	2ND VC BARNETT MOTTOLA, ENRICO R.	
STREET ADDRESS			STREET ADDRESS	1063 W DESOTO	
CITY - ST - ZIP			CITY - ST - ZIP	CLERMONT, FL 34711	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			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: <i>Edmund F. McGuire</i> Edmund F. McGuire <i>FINANCE OFFICER</i> 04-04-08 350-394-1767 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date Day/mo/Year #					



1st MOORE CR2E037 (10/07)