

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010890

Entity Name: AMERICAN LEGION ANMCGAF POST 383, INC

Current Principal Place of Business:

1297 NE 82ND AVENUE
OLD TOWN, FL 32680

Current Mailing Address:

P.O.BOX 220
OLD TOWN, FL 32680

FEI Number: 56-2438102

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHRISTIANS, M E
115 NE 112 AVENUE
OLD TOWN, FL 32680 US

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

Officer/Director Detail :

Title AJUTANT
Name EVIRS, FRED
Address 204 NE 306 AVE
City-State-Zip: OLD TOWN FL 32680

Title 1STV
Name HUTTO, FREDRICK M
Address 1222 NE 272ND AVE
City-State-Zip: OLD TOWN FL 32680

Title COMMANDER
Name PAULK, LESTER E
Address P O BOX 873
City-State-Zip: OLD TOWN FL 32680

Title 3VD
Name SEYMOUR, RUSSELL W
Address 27 SE 300TH AVE
City-State-Zip: OLD TOWN FL 32680

Title JA
Name SOMMER, PAUL G
Address 325 NE 278 AVE
City-State-Zip: OLD TOWN FL 32680

I hereby 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 all other like empowered.

SIGNATURE: LESTER G. PAULK

COMMANDER

03/05/2014

Electronic Signature of Signing Officer/Director Detail

Date