

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000007517

**Entity Name:** AMERICAN LEGION POST 390 WELLINGTON INC.**Current Principal Place of Business:**13833 WELLINGTON TRACE  
PMB 104  
WELLINGTON, FL 33414**Current Mailing Address:**13833 WELLINGTON TRACE  
PMB 104  
WELLINGTON, FL 33414-8576 US**FEI Number:** 80-0229294**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHWINER, JOHN Z  
13833 WELLINGTON TRACE  
PMB 104  
WELLINGTON, FL 33414 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:** JOHN Z. SHWINER

04/27/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	COMMANDER
Name	SHWINER, JOHN
Address	AMERICAN LEGION POST 390 13833 WELLINGTON TRACE PMB104
City-State-Zip:	WELLINGTON FL 33414

Title	COMMANDER
Name	NAPPI, ROBERT
Address	13833 WELLINGTON TRACE PMB 104
City-State-Zip:	WELLINGTON FL 33414-8576

Title	FINANCE OFFICER
Name	TAHAN, ANTHONY
Address	13833 WELLINGTON TRACE PMB 104
City-State-Zip:	WELLINGTON FL 33414-8576

Title	ADJUTANT
Name	ROBBS, KRISSANDRA
Address	AMERICAN LEGION POST 390 13833 WELLINGTON TRACE PMB 104
City-State-Zip:	WELLINGTON FL 33414

Title	FINANCE OFFICER
Name	OWENS, RICHARD
Address	AMERICAN LEGION POST 390 13833 WELLINGTON TRACE PMB 104
City-State-Zip:	WELLINGTON FL 33414

*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:** RICHARD OWENS

FINANCE OFFICER

04/27/2024

Electronic Signature of Signing Officer/Director Detail

Date