

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16930

Entity Name: THE AMERICAN LEGION HAROLD JOHNS POST 62,
DEPARTMENT OF FLORIDA, INC.**Current Principal Place of Business:**6412 SE FEDERAL HIGHWAY
STUART, FL 34997**Current Mailing Address:**6412 SE FEDERAL HIGHWAY
STUART, FL 34997 US**FEI Number: 30-0475436****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BASS, DNALD L
7166 SE OSPREY STREET
HOBE SOUND, FL 33455 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	CMDR
Name	REARICK, LARRY J
Address	6412 SE FEDERAL HIGHWAY
City-State-Zip:	STUART FL 34997

Title	2ND VICE COMMANDER
Name	ECKERLY, PATRICK A
Address	6412 SE FEDERAL HIGHWAY
City-State-Zip:	STUART FL 34997

Title	ADJ
Name	BRANDT, JERRY
Address	6412 SE FEDERAL HIGHWAY
City-State-Zip:	STUART FL 34997

Title	FO
Name	PYPER, BILL
Address	6412 SE FEDERAL HIGHWAY
City-State-Zip:	STUART FL 34997

Title	1ST VICE COMMANDER
Name	KOLINS, RAY
Address	6412 SE FEDERAL HIGHWAY
City-State-Zip:	STUART FL 34997

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: LARRY J REARICK**COMMANDER****04/26/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date