

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002884

Entity Name: AMERICAN LEGION AUXILIARY, SARASOTA BAY UNIT 30, INC.**Current Principal Place of Business:**4015 N LOCKWOOD RIDGE RD
SARASOTA, FL 34234**Current Mailing Address:**AMERICAN LEGION AUXILIARY UNIT #30
P.O. BOX 51344
SARASOTA, FL 34234 US**FEI Number:** 59-6150998**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ST. ESPRIT, JUNITA J
AMERICAN LEGION AUXILIARY UNIT #30
P.O. BOX 51344
SARASOTA, FL 34234 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:** JUNITA ST. ESPRIT

06/10/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	EXECUTIVE BOARD	Title	PRESIDENT
Name	ST. ESPRIT, JUNITA J	Name	MCCLANAHAN, EMILY
Address	AMERICAN LEGION AUXILIARY UNIT #30 PO BOX 51344	Address	AMERICAN LEGION AUXILIARY UNIT #30 P.O. BOX 51344
City-State-Zip:	SARASOTA FL 34234	City-State-Zip:	SARASOTA FL 34234
Title	SECRETARY	Title	TREASURER
Name	BAILEY, SHERRY	Name	NEVIS, TERESA
Address	AMERICAN LEGION AUXILIARY UNIT #30 P.O. BOX 51344	Address	AMERICAN LEGION AUXILIARY UNIT #30 P.O. BOX 51344
City-State-Zip:	SARASOTA FL 34234	City-State-Zip:	SARASOTA FL 34234
Title	VP		
Name	MALIZIO, CHARLENE		
Address	AMERICAN LEGION AUXILIARY UNIT #30 P.O. BOX 51344		
City-State-Zip:	SARASOTA FL 34234		

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: JUNITA J ST. ESPRIT

EXECUTIVE BOARD

06/10/2022

Electronic Signature of Signing Officer/Director Detail

Date