

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005623

Entity Name: AMERICAN LEGION AUXILIARY, NORMAN MCLEOD UNIT 26, INC.

FILED
Apr 20, 2015
Secretary of State
CC9907513642

Current Principal Place of Business:

2207 W BAKER ST
PLANT CITY, FL 33567

Current Mailing Address:

P.O. BOX 2542
PLANT CITY, FL 33564

FEI Number: 20-5844516

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOOVER, MARY
5016 PINE STREET
SEFFNER, FL 33584 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 PD
Name HOOVER, MARY L
Address 907 W REYNOLDS STREET
City-State-Zip: PLANT CITY FL 33563

Title TD
Name FORBES, PENNY
Address 3008 N FORBES RD
City-State-Zip: PLANT CITY FL 33565

Title SD
Name VANDERLAAN, PAT
Address 38664 FERM DR
City-State-Zip: ZEPHYRHILLS FL 33540

Title HISTORIAN
Name ANN, POTTER
Address 2204 VILLAGE PARK RD
City-State-Zip: PLANT CITY FL 33563

Title CHAP
Name MENTER, LORRAINE
Address 4822 SEDENO DR
City-State-Zip: ZEPHYRHILLS FL 33541

Title SGTA
Name MCDUGALL, MABEL
Address 460 DON TAB WAY
City-State-Zip: PLANT CITY FL 33565

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: MARY HOOVER

PRESIDENT

04/20/2015

Electronic Signature of Signing Officer/Director Detail

Date