

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002659

**Entity Name:** AMERICAN LEGION AUXILIARY, VETERANS MEMORIAL UNIT  
347, INC.

**FILED**  
**Jan 27, 2021**  
**Secretary of State**  
**4113840194CC**

**Current Principal Place of Business:**

699 W LADY LAKE BLVD  
LADY LAKE, FL 32159

**Current Mailing Address:**

PO BOX 802  
LADY LAKE, FL 32158

**FEI Number: 59-3280794**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ALLEN, KATHLEEN A  
1133 NASH LOOP  
THE VILLAGES, FL 32162 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:** KATHLEEN A ALLEN

01/27/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name CASWELL, MAUREEN  
Address 2291 HAMMOCK LN  
City-State-Zip: THE VILLAGES FL 32163

Title TD  
Name ALLEN, KATHLEEN  
Address 1133 NASH LOOP  
City-State-Zip: THE VILLAGES FL 32162

Title VPD  
Name RAY, MARIE  
Address 15940 SE 65TH ST RD  
City-State-Zip: OCKLAWAHA FL 32179

Title SEC  
Name KYLE, BARBARA A  
Address 314 GONZALES PL  
City-State-Zip: THE VILLAGES FL 32159

*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:** MAUREEN CASWELL

**PRESIDENT**

01/27/2021

Electronic Signature of Signing Officer/Director Detail

Date