### 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001317

Entity Name: AMERICAN LEGION AUXILIARY STERLING MCCLELLAN UNIT

NO. 142, INC.

# **Current Principal Place of Business:**

171 S.W. 2ND STREET POMPANO BEACH, FL 33060

# **Current Mailing Address:**

171 S.W. 2ND STREET

POMPANO BEACH, FL 33060 US

FEI Number: 65-0700719 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

CHAPMAN-THOMAS, BARBARA 2108 SW NATURA BLVD DEERFIELD BEACH, FL 33441 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

**FILED** Feb 07, 2013

**Secretary of State** 

CC8258893767

### Officer/Director Detail:

Title PΠ Title STD

Name HAMMES, REGINA Name GRINIS, DENICE Address 708 SW 75 AVE Address 1248 SW 1 AVE

City-State-Zip: NORTH LAUDERDALE FL 33068 City-State-Zip: POMPANO BEACH FL 33060

Title Title CT

GRIEVE, DEMETRIA Name **BROADHEAD MARION** Name

Address 1674 S.E. 8TH AVE. Address 404 NW 48 CT

City-State-Zip: POMPANO BEACH FL 33064 City-State-Zip: DEERFIELD BEACH FL 33441

Title TD Title **VPD** 

Name CHAPMAN-THOMAS BARBARA STEIN, VIRGINIA Name

Address 2108 SW NATURA BLVD 11021 NW 44 ST Address

City-State-Zip: DEERFIELD BEACH FL 33441 CORAL SPRINGS FL 33065 City-State-Zip:

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: BARBARA CHAPMAN-THOMAS

**TREASURER** 

02/07/2013