

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755108

FILED
Jan 30, 2009
Secretary of State

Entity Name: THE LADIES AUXILIARY OF SNPJ SUNCOAST LODGE #778, INC.

Current Principal Place of Business:

13383 COUNTY LINE RD.
BROOKSVILLE, FL 34609 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5852
SPRINGHILL, FL 34611 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LATIN, JOSEPHINE
11053 BLYTHVILLE RD
SPRINGHILL, FL 34606 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STAUFFER, WILMA
Address: 14308 EDGEKNOLL ST
City-St-Zip: BROOKSVILLE, FL 34613

Title: VD () Delete
Name: THOMAS, MARGARET
Address: 12499 HARKER ST
City-St-Zip: BROOKSVILLE, FL 34613

Title: SD () Delete
Name: LATIN, JOSEPHINE,
Address: 11053 BLYTHVILLE RD
City-St-Zip: SPRING HILL, FL 34608

Title: D () Delete
Name: KEBER, ELIZABETH A
Address: 196 OAK LAKE DR
City-St-Zip: SPRING HILL, FL 34608

Title: TD () Delete
Name: SOROS, ANNE
Address: 8642 WOODBRIDGE DR
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANNE SOROS

TREA

01/30/2009

Electronic Signature of Signing Officer or Director

Date