

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755108

FILED
Jan 09, 2010
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
Name: STAUFFER, WILMA
Address: 14308 EDGEKNOLL ST
City-St-Zip: BROOKSVILLE, FL 34613

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

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

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

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

Title: V.P.
Name: HARFMANN, WALTER M
Address: 15665 OAKCREST CIR.
City-St-Zip: BROOKSVILLE, FL 34604

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: WALTER HARFMANN

V.P.

01/09/2010

Electronic Signature of Signing Officer or Director

Date