2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2011
Secretary of State

DOCUMENT# N05000004297

Entity Name: COLUMBIA COUNTY AMERICAN LEGION AUXILIARY UNIT 57, INC.

Current Principal Place of Business:

2602 SW MAIN BLVD
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2177
LAKE CITY, FL 32056 US

New Mailing Address:

FEI Number: 59-2320951 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEHRLI, IRMA
488 SE FAWN GLEN
LAKE CITY, FL 32024 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: P/D
Name: DAVIS, JAN
Address: D160 NW KENSINGTON LANE
City-St-Zip: LAKE CITY, FL 32055

Title: V/D
Name: LINDA, LOWES
Address: P. O. BOX 2177
City-St-Zip: LAKE CITY, FL 32056

Title: V/D
Name: MOSCHETTI, NANCY
Address: 253 NW MELANIE WAY
City-St-Zip: LAKE CITY, FL 32056

Title: T/D
Name: ASH, FRANCES
Address: 152 SE DUSTIN TERRACE
City-St-Zip: LAKE CITY, FL 32025

Title: D
Name: WALSER, LINDA
Address: 118 SW GUTHERIE TERRACE
City-St-Zip: LAKE CITY, FL 32025

Title: D
Name: WEHRLI, IRMA
Address: 488 SW FAWN GLEN
City-St-Zip: LAKE CITY, FL 32024

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: FRANCES ASH T/D 04/04/2011
Electronic Signature of Signing Officer or Director Date