

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000008512

FILED
Dec 08, 2006
Secretary of State

Entity Name: AMERICAN LEGION AUXILIARY BELLEVIEW UNIT 284 INC

Current Principal Place of Business:

5513 SE 109TH ST.
BELLEVIEW, FL 34420

New Principal Place of Business:

5512 SE 109TH STREET
BELLEVIEW, FL 34420

Current Mailing Address:

5513 SE 109TH ST.
BELLEVIEW, FL 34420

New Mailing Address:

P.O. BOX 2456
BELLEVIEW, FL 34421

FEI Number: 59-2367184 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MONTGOMERY, MARY
9196 SW 32ND CT.
OCALA, FL 34476 US

Name and Address of New Registered Agent:

BARBIER, TERRI
9231 SE 120TH LOOP
SUMMERFIELD, FL 34491 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: TERRI BARBIER

12/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MONTGOMERY, MARY
Address: P.O. BOX 1150
City-St-Zip: BELLEVIEW, FL 34421

Title: S () Delete
Name: MCLAUGHLIN, RITA
Address: P.O. BOX 1150
City-St-Zip: BELLEVIEW, FL 34421

Title: T () Delete
Name: AMERINE, CAROL
Address: P.O. BOX 1150
City-St-Zip: BELLEVIEW, FL 34421

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARBIER, TERRI
Address: P.O. BOX 2456
City-St-Zip: BELLEVIEW, FL 34421

Title: S (X) Change () Addition
Name: MCLAUGHLIN, RITA
Address: P.O. BOX 2456
City-St-Zip: BELLEVIEW, FL 34421

Title: T (X) Change () Addition
Name: SIZEMORE, JOYCE
Address: P.O. BOX 2456
City-St-Zip: BELLEVIEW, FL 34421

Title: VP () Change (X) Addition
Name: HEARLSON, PEGGY
Address: P.O. BOX 2456
City-St-Zip: BELLEVIEW, FL 34421

I hereby certify that the information supplied with this filing does not qualify for the 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: TERRI BARBIER

P

12/08/2006

Electronic Signature of Signing Officer or Director

Date