

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 19, 2008 8:00 am
Secretary of State

02-19-2008 90031 050 ****71.00

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1. Entity Name

AMERICAN LEGION AUXILIARY UNIT 323, INC.



Principal Place of Business

AMERICAN LEGION POST 323
1124 ASHLAR AVE
LEHIGH ACRES FL 33936

Mailing Address

AMERICAN LEGION POST 323
1124 ASHLAR AVE
LEHIGH ACRES FL 33936



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

59-1794905

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WARREN, AGNES M
1428 ARCHER ST
LEHIGH ACRES FL 33972

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature is required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By: May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to:
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME SMITH, BARBARA
STREET ADDRESS 801 JUNO DR
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME DYK, TAMMY L
STREET ADDRESS 1651 CHESHIRE CIR W
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME TALBOT, BEVERLY
STREET ADDRESS 608 L'HOMMEDIU
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE 5
NAME KATHY CONLIFFE
STREET ADDRESS 1410 PLUMOSE BL
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☒ Change ☐ Addition

TITLE T
NAME WARREN, AGNES M
STREET ADDRESS 1428 ARCHER ST
CITY-ST-ZIP LEHIGH ACRES FL 33972 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PP
NAME SPEMER, MAXINE
STREET ADDRESS 710 PLUMOSE
CITY-ST-ZIP LEHIGH ACRES FL 33936 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Agnes M. Warren

AGNES M. WARREN 2-808

369-2086