

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 06, 2011
Secretary of State

Entity Name: AMERICAN LEGION AUXILIARY UNIT 155, INC.

Current Principal Place of Business:

6585 W. GULF TO LAKE HWY.
CRYSTAL RIVER, FL 34428

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 388
CRYSTAL RIVER, FL 344230388

New Mailing Address:

FEI Number: 59-2991391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, SANDRA W
3193 N. HYSSOPS POINT
BEVERLY HILLS, FL 344654233 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: CONTI, TONI
Address: 8578 N. PINE NEEDLE TERRACE
City-St-Zip: CRYSTAL RIVER, FL 344289610

Title: VD
Name: MIKULAS, SHAWN
Address: 12 SWEETGUM COURT SOUTH
City-St-Zip: HOMOSASSA, FL 344465110

Title: T
Name: LOGAN, BARBARA
Address: 8121 W. JUSTIN LANE
City-St-Zip: CRYSTAL RIVER, FL 344287173

Title: S
Name: BASSITT, SHAREN K
Address: 259 N MESQUITE PT
City-St-Zip: LECANTO, FL 34461738

Title: C
Name: ROYA, LUCILE M
Address: 1908 S GLENEAGLE TER
City-St-Zip: LECANTO, FL 344619753

Title: D
Name: PINK, MARIE
Address: 6153 W. PINE CIRCLE
City-St-Zip: CRYSTAL RIVER, FL 344298787

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: BARBARA LOGAN

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03/06/2011

Electronic Signature of Signing Officer or Director

Date