

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002634

FILED  
Jan 16, 2010  
Secretary of State

**Entity Name:** AMERICAN LEGION AUXILIARY, ORLANDO MEMORIAL UNIT 19, INC.

**Current Principal Place of Business:**

2101 LEE RD.  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

2101 LEE RD.  
ORLANDO, FL 32810

**New Mailing Address:**

FEI Number: 23-7178329    FEI Number Applied For ( )    FEI Number Not Applicable ( )    Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

RUESCHENBERG, BARBARA  
6543 BOOTH LANE  
ORLANDO, FL 32810    US

**Name and Address of New Registered Agent:**

LANGELLA, PATRICIA  
335 PONCE DE LEON PLACE  
ORLANDO, FL 32801    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: PATRICIA LANGELLA

01/16/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DEROUIN, KATHLEEN  
Address: 402 MONTICELLO DR.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: TD  
Name: LANGELLA, PATRICIA  
Address: 335 PONCE DE LEON PLACE  
City-St-Zip: ORLANDO, FL 32801

Title: VD  
Name: STACHELRODT, LOIS  
Address: 1236 RUSSELL DR.  
City-St-Zip: OCOEE, FL 34761

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: KATHLEEN DEROUIN

PRES

01/16/2010

Electronic Signature of Signing Officer or Director

Date