

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000003054

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Entity Name:** AMERICAN LEGION AUXILIARY, MEMORIAL UNIT 241, INC.

**Current Principal Place of Business:**

2101 LEGION RD  
SNEADS, FL 32460

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 125  
SNEADS, FL 32460

**New Mailing Address:**

**FEI Number:** 41-2261827

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHEPARD, MARJORIE A  
7173 SHADY GROVE RD  
GRAND RIDGE, FL 32442 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:** PRES  
**Name:** SHEPARD, MARJORIE A  
**Address:** 7173 SHADY GROVE RD.  
**City-St-Zip:** GRAND RIDGE, FL 32442

**Title:** T  
**Name:** BROWN, MARTHA K  
**Address:** 3486 RIVER ROAD  
**City-St-Zip:** SNEADS, FL 32460

**Title:** S  
**Name:** WALDEN, FAYE  
**Address:** 1847 GULF POWER RD  
**City-St-Zip:** SNEADS, FL 32460

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:** MARJORIE A. SHEPARD

PRES

03/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date