

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003895

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** AMERICAN LEGION AUXILIARY, OKEECHOBEE MEMORIAL UNIT 64, INC.

**Current Principal Place of Business:**

501 SE 2ND ST.  
OKEECHOBEE, FL 34974

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 64  
OKEECHOBEE, FL 34973

**New Mailing Address:**

P.O. BOX 64  
OKEECHOBEE, FL 34972 US

FEI Number: 59-6200812

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WELLS, PEGGY  
2908 SE 21 CTT.  
OKEECHOBEE, FL 34974 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: BRINEY, BEATRICE  
Address: 1450 SW 28TH ST.  
City-St-Zip: OKEECHOBEE, FL 34974

Title: TD  
Name: WELLS, PEGGY  
Address: 2908 SE 21 CT  
City-St-Zip: OKEECHOBEE, FL 34974

Title: VD  
Name: BOROMEI, JUNE  
Address: 310 SE 2ND ST.  
City-St-Zip: OKEECHOBEE, FL 34974

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: PEGGY L. WELLS

TD

04/10/2012

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

\_\_\_\_\_  
Date