

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000009798

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** AMERICAN LEGION AUXILIARY, HAWTHORNE UNIT 230, INC.

**Current Principal Place of Business:**

20370 SE HAWTHORNE RD.  
HAWTHORNE, FL 32640

**New Principal Place of Business:**

**Current Mailing Address:**

20370 SE HAWTHORNE RD.  
HAWTHORNE, FL 32640

**New Mailing Address:**

208 ASHLEY STREET  
HAWTHORNE, FL 32640

**FEI Number:** 59-2332577

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEEVERS, EVELY  
22020 SE 62ND LANE  
HAWTHORNE, FL 32640 US

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

EVANS, DORIS SECT'Y  
3238 NW 24TH AVE,  
GAINESVILLE, FL 32605 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: DORIS EVANSX

04/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WOMACK, WILMER A  
Address: 208 ASHLEY ST.  
City-St-Zip: HAWTHORNE, FL 32640

Title: S  
Name: EVANS, DORIS SECT'Y  
Address: 3238 NW 24TH AVE  
City-St-Zip: GAINESVILLE, FL 32605

Title: VP  
Name: HENDERSON, JETTIE VP  
Address: P.O. BOX 403  
City-St-Zip: HAWTHORNE, FL 32640

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: DORIS EVANS

SECT

04/28/2010

Electronic Signature of Signing Officer or Director

Date