

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001219

FILED
Jan 10, 2011
Secretary of State

Entity Name: AMERICAN LEGION AUXILIARY, NEW SMYRNA BEACH, UNIT 17, INC.

Current Principal Place of Business:

619 W. CANAL STREET
NEW SMYRNA BEACH, FL 32168 US

New Principal Place of Business:

Current Mailing Address:

P O. BOX 2095
NEW SMYRNA BEACH, FL 32170 US

New Mailing Address:

619 W. CANAL STREET
NEW SMYRNA BEACH, FL 32168 US

FEI Number: 59-3297488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REMINGTON, CHRISITANNE M
619 W. CANAL STREET
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

SAMPSON, MILDRED
619 W. CANAL STREET
NEW SMYRNA BEACH, FL 32168 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: MILDRED SAMPSON

01/10/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SAMPSON, MILDRED
Address: 619 W. CANAL STREET
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: VP
Name: MASKELL, RENEE
Address: 725 ELEANORE AVENUE
City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

Title: S
Name: MACDONALD, NANCY
Address: 2332 YULE TREE DRIVE
City-St-Zip: EDGEWATER, FL 32141 US

Title: T
Name: TINNEY, VIRGINIA
Address: 414 NORTH RIDGEWOOD AVENUE
City-St-Zip: EDGEWATER, FL 32132 US

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: MILDRED SAMPSON

P

01/10/2011

Electronic Signature of Signing Officer or Director

Date