

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004586

FILED  
Apr 14, 2011  
Secretary of State

**Entity Name:** AMERICAN LEGION AUXILIARY,JOHN F. MURPHY UNIT 303, INC.

**Current Principal Place of Business:**

C/O JOHN F.MURPHY AMERICAN LEGION POST 303  
27678 IMPERIAL SHORES BLVD.  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOHN F.MURPHY AMERICAN LEGION POST 303  
27678 IMPERIAL SHORES BLVD.  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

**FEI Number:** 90-0590784

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PIRUCKI, CAROLYN S  
27678 IMPERIAL SHORES BLVD.  
BONITA SPRINGS, FL 34134 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: PIRUCKI, CAROLYN S  
Address: 806 105TH AVE. N  
City-St-Zip: NAPLES, FL 34108

Title: VPD  
Name: WHITELEY, DEBORAH L  
Address: 28339 HIDDEN LAKE DR.  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VPD  
Name: ZEHNDER, PATRICIA L  
Address: 563 E. VALLEY DR.  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: TD  
Name: SEARLE, VIRGINIA M  
Address: 8921 SPRINGWOOD CT.  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: CD  
Name: JAKSTAVICH, RENETTA  
Address: 4817 ESPLANADE ST.  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: HD  
Name: MESMER, LISA  
Address: 3540 QUAILS WALK  
City-St-Zip: BONITA SPRINGS, FL 34134

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: VIRGINIA M. SEARLE

TD

04/14/2011

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

\_\_\_\_\_  
Date