

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000301

FILED  
Feb 01, 2012  
Secretary of State

**Entity Name:** AMERICAN LEGION AUXILIARY, LAKELAND UNIT 4, INC.

**Current Principal Place of Business:**

1375 ARIANA ST  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

1375 ARIANA ST  
LAKELAND, FL 33803

**New Mailing Address:**

**FEI Number:** 59-0582452

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FALCETTI, SUSAN  
527 CARLETON CT  
LAKELAND, FL 33803 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: DP  
Name: SNYDER, PAMELA  
Address: 1510 ARIANA ST #107  
City-St-Zip: LAKELAND, FL 33803

Title: T  
Name: FALCETTI, SUSAN  
Address: 527 CARLETON CT  
City-St-Zip: LAKELAND, FL 33803

Title: V  
Name: HERRICK, CINDY  
Address: 1703 GIB-GALLOWAY  
City-St-Zip: LAKELAND, FL 33810

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: SUSAN J FALCETTI

T

02/01/2012

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

\_\_\_\_\_  
Date