

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90025 042 ****70.00

DOCUMENT # N34568

1. Entity Name

**ALLIED VETERANS OF THE WORLD WOMENS AUXILIARY
POST #2, INC.**



Principal Place of Business

1965 STATE RD # 16
SAINT AUGUSTINE FL 32095
US

Mailing Address

PO BOX 840149
SAINT AUGUSTINE FL 32084
US

2. Principal Place of Business

3. Mailing Address

1965 State Rd 16

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

St. Augustine, FL

Zip

Country

Zip

Country

32084

4. FEI Number

59-2970714

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOWLES, LINDA
890 AIA BEACH BLVD #74
SAINT AUGUSTINE FL 32080

7. Name and Address of New Registered Agent

Name

JAKE Quigley

Street Address (P.O. Box Number is Not Acceptable)

6785 MAGNOLIA Lane

City

ST. AUGUSTINE

FL

Zip Code

32086

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jane B. Quigley

JAKE Quigley

1-28-06

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PDT ☒ Delete
NAME BOWLES, LINDA
STREET ADDRESS 890 AIA BEACH BLVD #74
CITY-ST-ZIP ST AUGUSTINE BEACH FL 32080

TITLE VPT ☒ Delete
NAME HOPKINS, MICHELLE
STREET ADDRESS 6125 CHURCH RD
CITY-ST-ZIP ELKTON FL 32033

TITLE TS ☒ Delete
NAME SOLANA, SANDY
STREET ADDRESS 268 YARBOROUGH CIRCLE
CITY-ST-ZIP SAINT AUGUSTINE FL 32095

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PDT ☒ Change ☐ Addition
NAME QUIGLEY, JAKE
STREET ADDRESS 6785 MAGNOLIA Lane
CITY-ST-ZIP ST. AUGUSTINE FL 32086

TITLE VPT ☒ Change ☐ Addition
NAME SOLANA SANDY
STREET ADDRESS 268 YARBOROUGH Circle
CITY-ST-ZIP ST. AUGUSTINE FL 32095

TITLE TS ☒ Change ☐ Addition
NAME COCHRAN LISA
STREET ADDRESS 2854 NORTH 3RD ST.
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE CHAPLAIN ☐ Change ☒ Addition
NAME WOODALL SANDY
STREET ADDRESS 255 ATLANTIS Circle 305-D
CITY-ST-ZIP ST. AUGUSTINE FL 32080

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jane B. Quigley

JAKE Quigley

1-28-06

904-814-2041