

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003043

FILED
Jan 03, 2008
Secretary of State

Entity Name: DEPARTMENT OF FLORIDA LADIES AUXILIARY TO THE VETERANS OF FOREIGN WARS, INC.

Current Principal Place of Business:

8463 SW 84 LOOP
OCALA, FL 34481

New Principal Place of Business:

Current Mailing Address:

PO BOX 773490
OCALA, FL 34477 US

New Mailing Address:

FEI Number: 23-7326563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSE, JOYCE E
8463 SW 84 LOOP
OCALA, FL 34481 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: D () Delete
Name: GAULT, FRANCES M
Address: 4439 SW 53RD. TERRACE
City-St-Zip: OCALA, FL 34474

Title: D () Delete
Name: NERNEY, NONA
Address: 513 NE 9TH COURT
City-St-Zip: HOMESTEAD, FL 33030

Title: OS () Delete
Name: MCDERMOTT, LEONA
Address: 4444 ROYAL FERN WAY
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: OJV () Delete
Name: ROMAN, KATHY
Address: 1562 JEFFORDS ST.
City-St-Zip: CLEARWATER, FL 33756

Title: OT () Delete
Name: ROSE, JOYCE E
Address: 8463 SW 84 LOOP
City-St-Zip: OCALA, FL 34481

Title: OC () Delete
Name: CRANE, SHEILA
Address: 1605 BATAAN LANE
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OS (X) Change () Addition
Name: GAULT, FRANCES M
Address: 4439 SW 53RD. TERRACE
City-St-Zip: OCALA, FL 34474

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: OC (X) Change () Addition
Name: TRIVETT, NANCY
Address: 15666 49TH STREET N. LOT 1000
City-St-Zip: CLEARWATER, FL 33762

Title: D (X) Change () Addition
Name: ROMAN, KATHY
Address: 1562 JEFFORDS ST.
City-St-Zip: CLEARWATER, FL 33756

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: OJV (X) Change () Addition
Name: CRANE, SHEILA
Address: 1605 BATAAN LANE
City-St-Zip: GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOYCE E. ROSE

TR

01/03/2008

Electronic Signature of Signing Officer or Director

Date