

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003043

FILED  
Mar 28, 2009  
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: OS ( ) 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: OC ( ) Delete  
Name: TRIVETT, NANCY  
Address: 15666 49TH STREET N. LOT 1000  
City-St-Zip: CLEARWATER, FL 33762

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: O/P (X) Change ( ) Addition  
Name: NERNEY, NONA  
Address: 27330 SW 166 AVE.  
City-St-Zip: HOMESTEAD, FL 33031

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

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

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

Title: O/T (X) Change ( ) Addition  
Name: ROSE, JOYCE E  
Address: 8463 SW 84 LOOP  
City-St-Zip: OCALA, FL 34481

Title: D (X) Change ( ) Addition  
Name: LOVE, LAURA  
Address: 2634 CRITTENDON ST.  
City-St-Zip: NORTH PORT, FL 34286

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

TRES

03/28/2009

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

\_\_\_\_\_  
Date