2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # N96000002828

1. Entity Name
HARRY F. NESBITT AUXILIARY TO POST NO 10087, LADIES AUXILIARY TO THE VETERANS OF FOREIGN WARS OF

Principal Place of Business	Mailing Address
2170 W. VETS LANE BEVERLY HILLS, FL 34465	15 N. DAVIS ST. BEVERLY HILLS, FL 34465

03242005 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-2040018
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RINGWOOD, BETTIE
15 N. DAVIS ST.
BEVERLY HILLS, FL 34465

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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 N/A
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	RINGWOOD, BETTIE
STREET ADDRESS	15 N. DAVIS ST.
CITY-ST-ZIP	BEVERLY HILLS, FL 34465
TITLE	VPD
NAME	DE CANDIA, LOUISE
STREET ADDRESS	52 S. ADAMS ST.
CITY-ST-ZIP	BEVERLY HILLS, FL 34465
TITLE	DT
NAME	BENFER, MARY
STREET ADDRESS	4533 ALAMANDA PL.
CITY-ST-ZIP	BEVERLY HILLS, FL 34465
TITLE	S
NAME	BLEIER, LORRAINE
STREET ADDRESS	79 S. JEFFERYS ST.
CITY-ST-ZIP	BEVERLY HILLS, FL 34465
TITLE	TD
NAME	BURNEY, ESTHER
STREET ADDRESS	502 S. MONROE ST.
CITY-ST-ZIP	BEVERLY HILLS, FL 34465
TITLE	TD
NAME	BAYERLEY, VELMA
STREET ADDRESS	259 W. SUGARBERRY LANE
CITY-ST-ZIP	BEVERLY HILLS, FL 34465

U00000355881
05/04/05-80011-019 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Mary L. Benfer Mary L. Benfer 4/29/05 (352)-527-1309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #