

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005385

FILED
Apr 27, 2005
Secretary of State

Entity Name: THE LADIES' AUXILIARY OF POST #3 OF THE REGULAR VETERANS ASSOCIATION, INC.

Current Principal Place of Business:

3621 CENTURY BOULEVARD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

3621 CENTURY BOULEVARD
LAKELAND, FL 33811

New Mailing Address:

FEI Number: 59-3261216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CATHEY, TONYA S
3621 CENTURY BLVD.
LAKELAND, FL 33811 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: FERRELL, KAREN V
Address: 6705 HIGH GROVE DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: VP () Delete
Name: HAMMOCK, DONNA VP
Address: 2061 EAST KEYSVILLE RD
City-St-Zip: LITHIA, FL 33547

Title: D () Delete
Name: PETTY, TAMMY
Address: 4490 BAILEY ROAD
City-St-Zip: MULBERRY, FL 33860

Title: S/T () Delete
Name: CROWE, DONNA
Address: 215 EAST WAY DRIVE
City-St-Zip: LAKELAND, FL 33803

Title: P () Delete
Name: CATHEY, TONYA S PRES
Address: 4921 DEVONSHIRE DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: COTTLE, BROOKE A
Address: 3621 CENTURY BLVD
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: DOREEN, WOLFE VP
Address: 940 CASTLE WAY
City-St-Zip: LAKELAND, FL 33803

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAREN V FERRELL

D

04/27/2005

Electronic Signature of Signing Officer or Director

Date