2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 8:00 am
Secretary of State
01-28-2005 90037 032 ****61.25

DOCUMENT # N96000005631

1. Entity Name
LADIES AUXILIARY TO POST 8698 VETERANS OF FOREIGN WARS OF THE UNITED STATES, INCORPORATED

50008067

Principal Place of Business	Mailing Address
520 EAST HIGHWAY 40 INGLIS, FL 34449	POST OFFICE BOX 204 INGLIS, FL 34449-0204

01212005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EUNICE, JOHNSON 520 E HWY 40 INGLIS, FL 34449	Name: MARJORIE LEONHARDT Street Address (P.O. Box Number is Not Acceptable): 520 E HWY 40 City: INGLIS FL Zip Code: 34449

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: Marjorie Leonhardt 1-26-'05
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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD EUNICE, JOHNSON 520 E HSY 40 INGLIS, FL 34449	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MARJORIE LEONHARDT 520 E. HWY 40 INGLIS FL 34449	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LEONHARDT, MARGE 520 EAST HIGHWAY 40 INGLIS, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PAULETTE COOPER 520 E. HWY 40 INGLIS FL 34449	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DUNMIRE, JEAN 520 EAST HIGHWAY 40 INGLIS, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LYNDA BOYMER 520 E. HWY 40 INGLIS FL 34449	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LYNDA BOYMER 520 E HWY 40 INGLIS FL 34449	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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:** Marjorie Leonhardt 1-26-'05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Cover Page 2