

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003451

FILED
Jun 14, 2007
Secretary of State

Entity Name: AMERICAN LEGION AUXILIARY, UNIT #3, INC.

Current Principal Place of Business:

1575 HWY 17 S
BARTOW, FL 33830 US

New Principal Place of Business:

Current Mailing Address:

POB 153
BARTOW, FL 33831 US

New Mailing Address:

1575 HWY 17 S
BARTOW, FL 33830 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

REEDER, CHERYL D
1310 N FLORAL AVE
BARTOW, FL 33830 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: P () Delete
Name: MCCUE, BARBARA
Address: 1705 S DAVIS AVE
City-St-Zip: BARTOW, FL 33830

Title: V () Delete
Name: SAGE, KELLIE
Address: 8250 PALMER RD
City-St-Zip: BARTOW, FL 33830

Title: T () Delete
Name: REEDER, CHERYL
Address: 1310 N FLORAL AVE
City-St-Zip: BARTOW, FL 33830

Title: S () Delete
Name: MACBLAANE, SHERRY
Address: 2055 S FLORAL AVE
City-St-Zip: BARTOW, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NICHOLAS, BETTY
Address: 220 W VALENCIA DRIVE
City-St-Zip: BARTOW, FL 33830

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

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

Title: S (X) Change () Addition
Name: MACBLANE, SHERRY
Address: 2055 S FLORAL AVE
City-St-Zip: BARTOW, FL 33830

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: CHERYL D REEDER

T

06/14/2007

Electronic Signature of Signing Officer or Director

Date