

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001317

FILED
Jan 05, 2012
Secretary of State

Entity Name: AMERICAN LEGION AUXILIARY STERLING MCCLELLAN UNIT NO. 142, INC.

Current Principal Place of Business:

171 S.W. 2ND STREET
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

171 S.W. 2ND STREET
POMPANO BEACH, FL 33060 US

New Mailing Address:

FEI Number: 65-0700719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN-THOMAS, BARBARA
2108 SW NATURA BLVD
DEERFIELD BEACH, FL 33441 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: PD
Name: GRIEVE DEMETRIA
Address: 900 SE 1 ST APT 38
City-St-Zip: POPANO BEACH, FL 33060

Title: STD
Name: TODERO PATRICIA
Address: 9836 MARINA BLVD UNIT 1027
City-St-Zip: BOCA RATON, FL 33428

Title: CT
Name: BROADHEAD MARION
Address: 1674 S.E. 8TH AVE.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VPD
Name: CONNELL-BROWN SUE
Address: 600 NE 59 CT
City-St-Zip: FT LAUDERDALE, FL 33334

Title: VPD
Name: HAMMES REGINA
Address: 708 SW 75 AVE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: TD
Name: CHAPMAN-THOMAS BARBARA
Address: 2108 SW NATURA BLVD
City-St-Zip: DEERFIELD BEACH, FL 33441

I hereby 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 all other like empowered.

SIGNATURE: BARBARA CHAPMAN-THOMAS

TREA

01/05/2012

Electronic Signature of Signing Officer or Director

_____ Date