

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90023 035 ****61.25

DOCUMENT # N99000004537 1. Entity Name LADIES AUXILIARY OF THE FLORIDA SOCIETY OF THE SONS OF THE AMERICAN REVOLUTION, INC.					
Principal Place of Business 229 SW 43 TERRACE GAINESVILLE FL 32607 US			Mailing Address 229 SW 43 TERRACE GAINESVILLE FL 32607 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-3580683	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOLLIEN, PATRICIA 229 S 43RD TERRACE GAINESVILLE FL 32607-2270				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>SOME</i> City FL Zip Code	
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 <i>Patricia Hollien</i> Signature, typed or printed name of registered agent and title if applicable. 1.23.04 DATE (NOTE: Registered Agent signature required when reinstating)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		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	PD WALLIN, PATRICIA STREET ADDRESS 9070 LAKEWOOD DR CITY-ST-ZIP SEMINOLE FL 33772	☒ Delete	TITLE	PD JONES, Shirley STREET ADDRESS 8256 Squire Rd. CITY-ST-ZIP PENSACOLA, FL 32514	☐ Change ☐ Addition
TITLE	VD MALCOLM, CAROLYN STREET ADDRESS 6098 SW 85TH STREET CITY-ST-ZIP OCALA FL 34476	☒ Delete	TITLE	1st VP CASEY, Dee STREET ADDRESS 348 European Lane CITY-ST-ZIP FT. PIERCE, FL 34982	☐ Change ☐ Addition
TITLE	SD HODALSKI, BARBARA STREET ADDRESS 4437 ATWOOD CAY CIRCLE CITY-ST-ZIP SARASOTA FL 34233	☒ Delete	TITLE	2nd VP Young, Norma STREET ADDRESS 10100 Hillview Rd Apt 322 CITY-ST-ZIP PENSACOLA, FL 32514	☐ Change ☐ Addition
TITLE	TD HOLLIEN, PATRICIA STREET ADDRESS 229 SW 43RD TERRACE CITY-ST-ZIP GAINESVILLE FL 32607-2270	☐ Delete	TITLE		☐ Change ☐ Addition
TITLE	RD JANTZEN, DIANNE STREET ADDRESS 10435 GOOSEBERRY COURT CITY-ST-ZIP TRINITY FL 34655	☐ Delete	TITLE		☐ Change ☐ Addition
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME		☐ Delete	NAME		☐ Change ☐ Addition
STREET ADDRESS		☐ Delete	STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP		☐ Delete	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: <i>Patricia Hollien</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			1.23.04 352 378-9771 Date Daytime Phone #		