2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 13, 2019
Secretary of State
4905345094CR

DOCUMENT# 751465

Entity Name: MUNROE AUXILIARY, INC.

Current Principal Place of Business:

1500 SW 1ST AVE
OCALA, FL 34471

Current Mailing Address:

P.O. BOX 6000
OCALA, FL 34478 US

FEI Number: 59-1755349

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POOLE WOOD, JENNIFER
1500 SW 1ST AVE
OCALA, FL 34471 US

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: JENNIFER POOLE WOOD 11/13/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	VP
Name	GROSSO, RICHARD
Address	1509 SE 18TH AVE.
City-State-Zip:	OCALA FL 34471

Title	VP
Name	BLAHUT, MARY
Address	PO BOX 6556
City-State-Zip:	OCALA FL 34478

Title	VP
Name	RITTER, CHRIS
Address	5080 NW 18TH ST.
City-State-Zip:	OCALA FL 34482

Title	P
Name	CHRISTMAN, JOHN
Address	1500 SW 1ST AVE
City-State-Zip:	OCALA FL 34471

Title	TREASURER, VP
Name	BOYER, DARLENE
Address	3349 NE 28TH AVENUE
City-State-Zip:	OCALA FL 34479

Title	VP
Name	BUTLER, MICHAEL
Address	5370 SE 22ND PLACE
City-State-Zip:	OCALA FL 34480

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: JOHN CHRISTMAN PRESIDENT 11/13/2019

Electronic Signature of Signing Officer/Director Detail — Date