

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002274

Entity Name: AMERICAN LEGION AUXILIARY, UNIT 233, INC.

Current Principal Place of Business:

560 NORTH WILDERNESS TRAIL
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

560 NORTH WILDERNESS TRAIL
PONTE VEDRA BEACH, FL 32082

FEI Number: 06-1830144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'NEILL, KAREN B
1009 N. 21ST STREET
JACKSONVILLE BEACH, FL 32250 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title 1VP
Name WILLIAMS, LINDA K
Address 560 NORTH WILDERNESS TRAIL
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title PRES
Name MILLS, JUDY
Address 560 NORTH WILDERNESS TRAIL
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title SEC
Name VASQUEZ, ANGIE
Address 560 NORTH WILDERNESS TRAIL
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title 2ND VP
Name HELMLY, KATHLEEN
Address 560 NORTH WILDERNESS TRAIL
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title TREA
Name BASS, ALLYSON K
Address 560 NORTH WILDERNESS TRAIL
City-State-Zip: PONTE VEDRA BEACH FL 32082

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: ALLYSON K BASS

TREASURER

04/22/2014

Electronic Signature of Signing Officer/Director Detail

Date