

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003054

Entity Name: AMERICAN LEGION AUXILIARY, MEMORIAL UNIT 241, INC.**Current Principal Place of Business:**2101 LEGION RD
SNEADS, FL 32460**Current Mailing Address:**PO BOX 125
SNEADS, FL 32460**FEI Number:** 41-2261827**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROWN, MARTHA A
3486 RIVER ROAD
SNEADS, FL 32460 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:** MARTHA A BROWN

04/17/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	BROWN, MARTHA A
Address	3486 RIVER ROAD
City-State-Zip:	SNEADS FL 32460

Title	SECRETARY/TREASURER
Name	WALDEN , FAYE
Address	1847 GULF POWER RD.
City-State-Zip:	SNEADS FL 32460

Title	2ND VICE PRESIDENT
Name	MANN, DEBRA E.
Address	2214 MULBERRY BLVD.
City-State-Zip:	TALLAHASSEE FL 32303

Title	CHAPLAIN
Name	CLOUD, MARY FRANCES
Address	PO BOX 431
City-State-Zip:	GRAND RIDGE FL 32442

Title	HISTORIAN
Name	ROBERTS, KASSI
Address	5153 PRIVATE RD
City-State-Zip:	MARIANNA FL 32446

Title	1ST VICE PRESIDENT
Name	ZEIGLER, MARGARET
Address	7323 BIRCHWOOD ROAD
City-State-Zip:	GRAND RIDGE FL 32442

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: FAYE WALDEN**TREASURER**

04/17/2025

Electronic Signature of Signing Officer/Director Detail

Date