

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004848

Entity Name: AMERICAN LEGION AUXILIARY, WINTER PARK MEMORIAL
UNIT 112, INC.**FILED**
Feb 15, 2019
Secretary of State
7098328277CC**Current Principal Place of Business:**4490 GOLDENROD RD.
WINTER PARK, FL 32792**Current Mailing Address:**PO BOX 2246
GOLDENROD, FL 32733 US**FEI Number: 30-0559711****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**COLBERT, NELLIE E
1958 POINCIANA ROAD
WINTER PARK, FL 32792 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	T
Name	COLBERT, NELLIE E
Address	1958 POINCIANA ROAD
City-State-Zip:	WINTER PARK FL 32792

Title	PRESIDENT
Name	BERRIOS, MARGE
Address	205 TAVESTOCK LOOP
City-State-Zip:	WINTER SPRINGS FL 32708

Title	CHAPLAIN
Name	SHANNON, DEBORAH
Address	108 JAMAICA DRIVE
City-State-Zip:	COCOA BEACH FL 32931

Title	S
Name	COLBERT, NELLIE E
Address	1958 POINCIANA ROAD
City-State-Zip:	WINTER PARK FL 32792

Title	HISTORIAN
Name	PADGETT, AUNITA
Address	2907 GLYN WAY
City-State-Zip:	ORLANDO FL 32807

Title	VICE PRESIDENT
Name	DIEHL, CATHY
Address	4736 NORTH GOLDENROD ROAD
City-State-Zip:	WINTER PARK FL 32792

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: NELLIE E. COLBERT**RA****02/15/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date