

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006057

Entity Name: AMERICAN LEGION AUXILIARY, ROBERT H.L. DABNEY UNIT
192, INC.**FILED**
Apr 10, 2019
Secretary of State
3085132969CC**Current Principal Place of Business:**3130 DR. MARTIN LUTHER KING JR. BLVD
FORT MYERS, FL 33916**Current Mailing Address:**P.O. BOX 117
FORT MYERS, FL 33902**FEI Number: 56-2531789****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FULLER, HELEN B
1828 S MARKLEY CT
FORT MYERS, FL 33916 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	PRESIDENT
Name	FULLER, HELEN B
Address	1828 S MARKLEY COURT
City-State-Zip:	FORT MYERS FL 33916

Title	CHAPLIN
Name	HUSTON, LURIE
Address	4221 OTHELLO LN, APT 219
City-State-Zip:	FORT MYERS FL 33916

Title	TREASURER
Name	WATSON, CECILIA
Address	2950 ST CHARLES ST
City-State-Zip:	FORT MYERS FL 33916

Title	SECRETARY
Name	CHANCEY, MALTORIA W
Address	840 ZANA DR
City-State-Zip:	FORT MYERS FL 33905

Title	PRESIDENT, VP
Name	HAWKINS, CICELY
Address	3213 34TH ST W
City-State-Zip:	LEHIGH ACRES FL 33971

Title	SERGEANT-AT-ARMS
Name	WHITE, MAMIE
Address	4761 SWANSON LOOP # F
City-State-Zip:	FORT MYERS FL 33917

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: MALTORIA W CHANCEY**SECRETARY****04/10/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date