AMERICAN LEGION AUXILIARY DEPARTMENT OF FLORIDA, INC 1912 A LEE RD ORLANDO, FLORIDA 32810 For the day/time of meetings:
Please write exactly which day of the week they are held each month

MAY 1 6 2025

Ex: 1st Thursday, at 5 pm.

entered &

2025-2026

UNIT OFFICERS' LIST

This form must be returned within 10 days of Unit elections or no later than May 29, 2025. No membership packets will be provided until this form is received at Department Headquarters! No other format will be accepted. **All 2025 dues must be paid at the time of elections!** All information is required on this form.

Unit Name: Marlin Moore	_ _{Unit #} 13	3 District #	14
Unit's Mailing Address: 16401 SW 90 Aver	nue		
(Street address	s or PO Box)	Palmetto Bay	
Unit Email Address: alaunit133@gmail.com		(City)	(Zip)
Date of Election 5-12-25	Day/Time Mee	eting are Held1st T	uesday 7 pm
Unit EIN#80-0364090	Corporation #	N0900001	0770
One char	_ corporation #		and the second of the second o
Must check each box to confirm that the Unit has v	erified each O	fficer's current yr d	ues are paid.
President: Monique Peddle	Vice Pre	esident:	
Daytime Phone: 305-975-5333		ne:	
Email: gardenmonique@gmail.com			
2 nd Vice President:	_ 3 rd Vice		
Daytime Phone:		e:	
Email:			
Secretary: Billie Keller Member # 302741751	Treasur	_{er:} <u>Diane Kes</u> 301319116	
205 090 0162	ivlember #	ne: 305-608-	5373
Daytime Phone: 305-969-9162 Email: bdkangel@juno.com		kmiami@hotm	

Chaplain: Suzanne Schlernitzauer	Historian:		
Member#301774462	Member #		
Daytime Phone: 305-439-4518	Daytime Phone:		
Email: smseintegratedmedicalaudit.com	Email:		
Sgt-at-Arms: Lisa Lungaro	Membership:		
Member # 300970249	Member #		
Daytime Phone: 786-236-2096	Daytime Phone:		
Email: Lisacrazylungaro@gmail.com	Email:		
Member at Large: Member # Daytime Phone: Email:	Member at Large Stacy Cusano Member # 130527691 Daytime Phone: 305-505-3744 Email: scusano13@gmail.com		
Member at Large: Charlotte Marvez Member # 302950179 Daytime Phone: 786-287-3599 Email: charlotte.marvez@yahoo.com Member at Large: Member # Daytime Phone: Email: Email:	Member # Daytime Phone:		
Completed By:	Date:		

Return Form to Department: Email: membership@alafl.org