

2005 NOT-FOR-PROFIT CORPORATION

2006 ANNUAL REPORT (AR) REINSTATEMENT

DOCUMENT # N01000005006

1. Entity Name
MARINE CORPS LEAGUE, BAREFOOT BAY DETACHMENT #918, INC.



APPROVED AND FILED

06 JUL 31 PM 5:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing Address
1433 GARDENIA DRIVE
BAREFOOT BAY, FLA. 32976



1st MOORE CR2E037 (10/04)

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 59-3435061
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JOHN YOUNG
1433 GARDENIA DRIVE
BAREFOOT BAY, FLA. 32976

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME	HEADY, Russell S.
STREET ADDRESS	350 Dolphin Circle
CITY-ST-ZIP	BAREFOOT BAY, FLA. 32976
TITLE NAME	WAYNE BRUCE
STREET ADDRESS	759 CONCHA DANE
CITY-ST-ZIP	SEBASTIAN, FLA. 32958
TITLE NAME	Randy Barnes
STREET ADDRESS	P.O. Box 601048
CITY-ST-ZIP	Miami, FLA. 32950
TITLE NAME	CHRISTALINE, JOHN
STREET ADDRESS	338 S PAPAYA CIRCLE
CITY-ST-ZIP	BAREFOOT BAY FL. 32976
TITLE NAME	JOHN YOUNG
STREET ADDRESS	1433 GARDENIA DRIVE
CITY-ST-ZIP	BAREFOOT BAY, FLA. 32976
TITLE NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John Young 7/24/06 777 664-9782

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Document corrected per John Young, ASC