2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2001 8:00 am
Secretary of State
01-20-2001 90013 004 ****61.25

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DOCUMENT # N06680

1. Entity Name

MARINE CORPS LEAGUE BREVARD COUNTY DETACHMENT, I

Principal Place of Business	Mailing Address
3403 MAZUR DRIVE MELBOURNE FL 32901-8240	3403 MAZUR DRIVE MELBOURNE FL 32901-8240

J00941

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2572282 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CROFT, EARL G 3403 MAZUR DR MELBOURNE FL 32901-8240	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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP D COLLINS, THE REV PERRY W 2255 PARADISE BLVD #21 INDIALANTIC FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BEVAN, MARY M 1125 GOLDEN ISLE DR #1423 MELBOURNE, FL 32935	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S T CROFT, EARL G. 3403 MAZUR DRIVE MELBOURNE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP VALDASTRI, JOESPH A 670 BIMINI ROAD SATELLITE BEACH, FL 32937	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STEVEM..ERMEST..SR 670 VENETIAN WAY MERRITT ISLAND FL 32953-4116	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT HAMPTON HERMAN I 2608 SADLER LANE MELBOURNE, FL 32935	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BEKERIS, JOSEPH A JR 450 SAND PIPER DR SATELLITE BCH FL 32937	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLLINS, THE REV PERRY W 255 PARADISE BLVD # 21 INDIALANTIC FL 32903-2466	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NASH, JACK 2751 ROUEN AVENUE MELBOURNE FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CROFT EARL G. 3403 MAZUR DR MELBOURNE, FL 32901-8240	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~R~~ ~~HAMPTON, HERMAN I~~ ~~2608 SADLER LANE~~ ~~MELBOURNE, FL 32935~~	☐ ~~Delete~~	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED Jan 10, 2001 321-727-2956
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #