

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004 8:00 am
Secretary of State

07-12-2004 90030 040 ****61.25

DOCUMENT # N06680 1. Entity Name MARINE CORPS LEAGUE BREVARD COUNTY DETACHMENT, INC.	
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Principal Place of Business 2608 SADLER LN MELBOURNE, FL 32935	Mailing Address 2608 SADLER LN MELBOURNE, FL 32935
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54061861



2. Principal Place of Business 957 BAYWARD CT Suite, Apt. #, etc.	3. Mailing Address 957 BAYWARD CT Suite, Apt. #, etc.
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07072004 Chg-NP CR2E037 (10/03)

City & State ROCKLEDGE, FL	City & State ROCKLEDGE, FL
Zip 32955 Country USA	Zip 32955 Country USA

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 HAMPTON, HERMAN 2608 SADLER LN MELBOURNE, FL 32935	7. Name and Address of New Registered Agent Name FRANK INGRAHAM Street Address (P.O. Box Number is Not Acceptable) 957 BAYWARD CT City ROCKLEDGE FL Zip Code 32955
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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 <u>Frank Ingraham</u> FRANK INGRAHAM <u>7/7/2004</u> Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when consisting)
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Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLLINS, THE REV PERRY W 2255 PARADISE BLVD #21 INDIALANTIC, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T INGRAHAM, FRANK 957 BAYWARD CT ROCKLEDGE, FL 32955 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P INGRAHAM, FRANK 957 BAYWARD CT ROCKLEDGE FL 32955 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BEVAN, MARY 2125 GOLD ISLE DR # 1423 MELBOURNE, FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VAL DASTRI, JOESPA A 670 BIMINI ROAD MELBOURNE, FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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	D RUDOLPH, STEVEN 677 WALNUT DR MELBOURNE FL 32935 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HAMPTON, HERMAN T 2608 SADLER LANE MELBOURNE, FL 32935 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMPTON, HERMAN T 2608 SADLER LANE MELBOURNE, FL 32935 ☒ Change ☐ Addition

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: <u>Frank Ingraham</u> FRANK INGRAHAM <u>7/7/2004</u> <u>321-632-8917</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Daytime Phone #
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