

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90205 035 ****61.25

DOCUMENT # N12586

1. Entity Name
NAVY LEAGUE OF THE UNITED STATES, PALM BEACH COU

Principal Place of Business P O BOX 241 PALM BEACH FL 33480	Mailing Address P O BOX 241 PALM BEACH FL 33480-0241
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address P.O. Box 14344 Suite, Apt. #, etc.
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City & State N. Palm Beach, Florida	4. FEI Number 65-0033917	Applied For <input type="checkbox"/> Not Applicable
Zip 33408	Country Palm Beach	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
RESNIK, EDWARD D
342 COUNTRY CLUB DR
TEQUESTA FL 33462

7. Name and Address of New Registered Agent
 Name: **William J. Waylett, Jr.**
 Street Address (P.O. Box Number is Not Acceptable): **12678 ELLISON WILSON ROAD**
 City: **Juno Isles** FL Zip Code: **33409**

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]* **Treasurer** *[Signature]* **William J. Waylett, Jr.** **President** **4/30/2000**
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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHANCK, STANLEY E. 2025 BEDFORD DR PALM BEACH GARDENS FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAEDER, ROBERT R 19055 LOXAHATCHEE RIVER ROAD JUPITER FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TURNER, HELEN 325 29TH ST WEST PALM BEACH FL 33407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNMIRE, PHILLIP L 13314 DOUBLETREE CIRCLE WELLINGTON FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNIGHT, PETER L. 201 RUSSLYN DR WEST PALM BEACH FL 33405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RESNICK, EDWARD D 342 COUNTRY CLUB DR TEQUESTA FL 33469

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *[Signature]* **William H. McCauley** **4/30/2000** **(561)793-5558**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)