2007 NOT-FOR-PROFIT CORPORATION

Feb 08, 2007 8:00 am **ANNUAL REPORT** Secretary of State DOCUMENT # N12586 02-08-2007 90038 041 ****61.25 NAVÝ LEAGUE OF THE UNITED STATES, PALM BEACH COUNCIL, INC. Principal Place of Business Mailing Address 411111494 PO BOX 14344 PO BOX 14344 NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02032007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 65-0033917 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FROEHLICH, JOHN F 12008 SOUTH SHORE BLVD Street Address (P.O. Box Number is Not Acceptable) **SUITE 211** WELLINGTON, FL 33414 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Addition DALY, NORMAN F NAME NAME STREET ADDRESS 126 LAKESHORE DR #1126 STREET ADDRESS CITY-ST-ZIP NORTH PALM BEACH, FL 33408 CITY-ST-ZIP TITLE Delete TITLE TR- VP Change Addition SULLIVAN, THOMAS NAME NAME JOHN & FROEHLICH STREET ADDRESS 1213 EAGLE GLIDE WAY STREET ADDRESS 13636 CALLINGYON ON CITY-ST-ZIP STUART, FL 34997 CITY-ST-7IP WELVIALLEN EL 33414 TITLE Delete TITEF Addition KIRTH YULMAN NAME HABICHT, FRANK H NAME 2742 YARMOUTH ON STREET ADDRESS 208 SANFORD AVE STREET ADDRESS CITY-ST-ZIP PALM BEACH, FL 33480 CITY-ST-ZIP VPD TITLE ☐ Delete TITLE ☐ Addition PEDRICK, DANIEL NAME NAME STREET ADDRESS 4196 WINGO ST STREET ADDRESS CITY - ST - ZIP TEQUESTA, FL 33469 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME O'DONNELL, MERRY T NAME STREET ADDRESS 431 N. LYRA CIR. STREET ADDRESS CITY-ST-ZIP JUNO BEACH, FL 33480 CiTY-ST-7IP TITLE VPD ☐ Delete TITLE ☐ Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

CITY-ST-ZIP

STREET ADDRESS

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-7IP

KNIGHT, PETER L

201 RUSSLYN DR

WEST PALM BEACH, FL 33405

1/31/07

FILED