FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # N22772

(0)

MARINE CORPS LEAGUE DESOTO DETACHMENT #588, INC.

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Principal Place of Business				Mailing Address					{	DI QIBIF DIBII DID	ii Milii	ALDII AINII INNI	
C/O JOHN DRAGON 4119 43RD AVENUE WEST BRADENTON FL 34205 C/O JOHN DRAGO 4119 43RD AVENUE BRADENTON FL 34205 BRADENTON FL 34205					WEST								
							3. Date Incorporated or Qualified 10/01/1987 3a. Date of Last Report 01/24/1995			Report 995			
2. Principal Place of Business 21 SAME				2a. Mailing Address 26 SAME					4. FEI Number Applied For Not Applicable				
Suite, Apt. #, etc.			Suite, Apt. #, etc.						5. Certificate of Status Desired				
City & State			27	City & State					Fee Required 6. Election Campaign Financing \$5.00 May Be				
23			28	28					Trust Fund Contribution	<u> </u>	Adde	d to Fees	
Zip 24	Country 25 MANATEE		29	Zιρ		Country 10 MANATEE			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
Name and Address of Current I			Regis	egistered Agent					10. Name and Address of New Re	me and Address of New Registered Agent			
						B1		Name					
DRAGON, JOHN 4119 43RD AVENUE WEST							-	Street Addres	ss (P.O. Box Number is Not Acceptable)				
BRADENTON FL 34205							-						
						84	-	City		Et 8	5 Z(p Code	
11 Purcuan	I to the provie	ione of Sections 617 0602 a	nd 61	7 1508 Florida Statute	e the	abovia.i	l na	med corporat	ion submits this statement for the purpo	FL	o ite r	poistered office	
or regist	ered agent, or	both, in the State of Florida. pt the obligations of, Section	. Suc	h change was authorize	d by t	he corp	oor	ration's board	of directors. I hereby accept the appoin	itment as regi	stered	agent. I am	
SIGNATURE	Signature typed	or printed name of registered agent and	d litte if	applicable (NOT	E: Rugis	stered Age	nt s	signature required v	vhen reinstating)	DATE			
12.		OFFICERS AND I			_	13.	_		ADDITIONS/CHANGES TO OFFIC	ER\$ AND DIF	ECTO	RS IN 12	
TITLE	PD			DELETE	1	1 1 THTLE				□ c	nange	Addition	
NAME		N, JOHN			- 1	1 2 NAME							
STREET ADDRESS	-	RD AVENUE WEST			- 1	1 3 STREET	T A	DDRESS					
CITY - ST - ZIP		NTON FL				14 CHY-5	ST-	ZIP					
TITLE	D	115044111 A		DELETE	- [:	21 TITLE				□c	nange	Addition	
NAME		HERMAN G.			- 13	22 NAME							
STREET ADDRESS	,	ND AVE.TER.W.			- [3	23 STREET	T A	DDRESS					
CITY - ST - ZIP		NTON FL		f Drusts	_	2 4 CITY-	ST	- ZIP				E Addition	
TITLE	D	S, CARL S JR		DELETE		31 TITLE				П	nange	Addition	
NAME	440.40	- · · · · · · · · · · · · · · · · · · ·				32 NAME		CORECC					
STREET ADDRESS		NTON FL				3 3 STREET		•					
CITY - ST - ZIP TITLE	S	1101112		DELETE		3 4. CITY -: 4 1 TITLE	21.	- 217		Пс	nange	☐ Addition	
NAME	SEMON	S, WILLIAM J				4 2 NAME					•	-	
STREET ADDRESS	F00 447	'H AVE E				4 3 STREET		DORESS					
CITY-ST-ZIP		NTON FL				4.4 CITY - 9							
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NAME						5 2 NAME							
STREET ADDRESS	5				_ [:	5 3 STREET	T A	DORESS					
CITY-ST-ZIP					_ [:	5 4 CITY - S	<u>s</u> 1-	ZIP		-			
TITLE				DELETE	1	6 1 TITLE				□ c	hange	Addition	
NAME						6.2 NAME							
STREET ADDRESS	s					6 3 STREET	I Al	DORESS					
CITY-ST-ZIP		Al- 1-6	1- 21 1	- 49 1 1		6.4 CITY - S				MOVE P	Ctat :	1 6 mil	
14. I do here certify th	eby certify that nat the informa	the information supplied with ition indicated on this annual	n this repo	s tiling is voluntarily furni: irt or supplemental annu	sned a Jal rep	ana ace ort is tri	ıs ue	not quality for and accurate	the exemption stated in Section 119.07 and that my signature shall have the sa	ری زد}, Fiorida ame legal effe	Statut It as it	les. I turther f made under	
oath; tha	at I am an offic	per or director of the corpora	tion c	or the receiver or trustee	empo	owered	to	execute this	and that my signature shall have the sa report as required by Chapter 617, Flori	da Statutes; a	ind the	at my name	