FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N22772

MARINE CORPS LEAGUE DESOTO DETACHMENT #588, INC.

Principal Place of Business C/O JOHN DRAGON 4119 43RD AVENUE WEST **BRADENTON FL 34205**

2. Principal Place of Business

Mailing Address

2a. Mailing Address

26

C/O JOHN DRAGON 4119 43RD AVENUE WEST **BRADENTON FL 34205**

FILED Feb 10, 1999 8:00am **Secretary of State**

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3. Date Incorporated or Qualifed

10/01/1987

Suite, Apt.	#, etc	Suite, Apt. #, etc.		4. FEI Number			App	olied For
22	SAME	Suite, Apt. #, etc.	7/=		59-0919787		Not	Applicable
City & State		City & State			5. Certifcate of Status Desire	<u> </u>	\$8.75 Ad Fee Req	
Zip	Country	Zip	Country		6. Election Campaign Financi	na	\$5.00 N	May Be
24	25	29 30			Trust Fund Contribution			Fees
9. Name and Address of Current Registered Agent					10. Name and Address of Ne	w Registered	Agent	
			81	Name				
DD4CON JOUR						. 4-11-1		
DRAGON, JOHN				Street Addre	ss (P.O. Box Number is Not Acc	eptable)		
4119 43RD AVENUE WEST								
BRADENTON FL 34205					·			
			84	City		FL	85 Zip C	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent of both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes. SIGNATURE Signature, band or printer name of registered agent and time if applyable. (NOTE: Registered Agent signature required when reinstating)								
12.	OFFICERS AND		13.	Signotoro roquiros	ADDITIONS/CHANGES TO	OFFICERS AN	ID DIRECTOR	RS IN 12
	40	☐ DELETE 1.1			-7		Change	☐ Addition
NAME :	1 T		1.2 NAME					
STREET ADDRESS			1.3 STREET ADDRESS					
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-ST		•			
TITLE	D	DELETE 2.1		-21			☐ Change	Addition
NAME			2.2 NAME					
STREET ADDRESS	I MINEL, I ILI MANA V.		2.3 STREET	AUDSESS				
•			2.4 CiTY-S		•		•	
CITY-ST-ZIP			3.1 TITLE	1-21-			☐ Change	Addition
			3.2 NAME					<u> </u>
NAME	DOTALO, OATE O ST			ADDRESS				
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NAME .	MCCOY, KENNETH A		4. 2 NAME				gi.	,
STREET ADDRESS	P.O. BOX 11423 N/A		4.3 STREET					20 G
CITY-ST-ZIP	BRADENTON FL 34282		4.4 CITY-ST	-ZIP		•	Change	Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME				☐ Change	☐ Addraoli
NAME			•	*DDDDD00				-
STREET ADDRESS			5.3 STREET	1				1
CITY-ST-ZIP .		D perezz	5.4 CITY-ST 6.1 TITLE	- ZIP			☐ Change	☐ Addition
TITLE .		☐ DELETE			*.		☐ Change	Audition
NAME			6.2 NAME					ļ
STREET ADDRESS	•		6.3 STREET	i		•		. 1
C/TY-ST-ZIP			6.4 CITY-ST	r-ZIP				1

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 annual report or emplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: