

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2007 8:00 am**  
**Secretary of State**

01-16-2007 90208 039 \*\*\*\*62.25

**DOCUMENT # N95000005189**

1. Entity Name  
**NAVY LEAGUE OF THE UNITED STATES CLEARWATER  
COUNCIL, INC.**



Principal Place of Business  
**7574 CUMBERLAND CT  
LARGO, FL 33777 US**

Mailing Address  
**PO BOX 6122  
PALM HARBOR, FL 34684**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01082007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**59-3369479**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PUCCI, LEONARD G  
2406 SUMMERLIN DR.  
CLEARWATER, FL 33764**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

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

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME **P**  
STREET ADDRESS **KING, MONROE J**  
CITY-ST-ZIP **7574 CUMBERLAND CT  
LARGO, FL 33777**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME **V**  
STREET ADDRESS **SCHOTT, GEORGE H**  
CITY-ST-ZIP **2581 INDIGO DR  
DUNEDIN, FL 34698**

TITLE ☐ Change ☒ Addition  
NAME **Murray, William**  
STREET ADDRESS **1451 Stewart Blvd**  
CITY-ST-ZIP **Clearwater FL 33764**

TITLE ☐ Delete  
NAME **T**  
STREET ADDRESS **ROSKO, JOHN**  
CITY-ST-ZIP **220 PINE ROAD  
BELLEAIR, FL 33756**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **S**  
STREET ADDRESS **KING, BARBARA**  
CITY-ST-ZIP **7574 CUMBERLAND COURT  
LARGO, FL 33777**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **JA**  
STREET ADDRESS **PUCCI, G. LEONARD**  
CITY-ST-ZIP **2406 SUMMERLIN DRIVE  
CLEARWATER, FL 33764**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME **V**  
STREET ADDRESS **MURRAY, WILLIAM S**  
CITY-ST-ZIP **1451 STEWART BLVD  
CLEARWATER, FL 33764**

TITLE ☐ Change ☒ Addition  
NAME **D**  
STREET ADDRESS **Lewis, Billy**  
CITY-ST-ZIP **13696 Eagles Walk Dr.  
Clearwater FL 33762**

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.

**SIGNATURE:**

**G. Leonard Pucci**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1/10/07 727-531-8026**