

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721356

Entity Name: AUXILIARY FLOTILLA 3, DIVISION 2, INC.**Current Principal Place of Business:**4850 N FLAGLER DRIVE
W PALM BEACH, FL 33407-2956**Current Mailing Address:**4850 N FLAGLER DRIVE
W PALM BEACH, FL 33407-2956**FEI Number:** 59-0546088**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KURTZ, JOHN
13919 COLUMBINE AVE
WELINGTON, FL 33414 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	VICE COMMANDER
Name	TILLEY, ROBERT
Address	171 MOHAWK TRAIL NORTH
City-State-Zip:	JUPITER FL 33458

Title	T/D
Name	KURTZ, JOHN
Address	13919 COLUMBINE AVE.
City-State-Zip:	WELLINGTON FL

Title	COMMANDER
Name	BARTELS, GUY
Address	13715 73TH STREET NORTH 8689 112TH TERRACE
City-State-Zip:	NORTH PALM BEACH FL 33412

Title	V/COMMANDER
Name	HUDSON, GREG
Address	12216 85TH ROAD NORTH
City-State-Zip:	WEST PALM BEACH FL 33411

Title	SECRETARY
Name	WALTON, ROBERT
Address	212 AVILA RD
City-State-Zip:	WEST PALM BEACH FL 33405

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOHN KURTZ**TREASURER****01/25/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date