

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723017

Entity Name: NAVY LEAGUE OF THE UNITED STATES, FORT LAUDERDALE COUNCIL, INC.**FILED**
Feb 26, 2020
Secretary of State
8952244103CC**Current Principal Place of Business:**845 S. SOUTHLAKE DRIVE
HOLLYWOOD, FL 33019**Current Mailing Address:**PO BOX 350625
FT LAUDERDALE, FL 33335-0625 US**FEI Number: 59-1412425****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ATKINSON, LYNN
845 S. SOUTHLAKE DRIVE
HOLLYWOOD, FL 33019 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:** LYNN ATKINSON**02/26/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PD
Name MONTES, ABIUD
Address 9860 NW 10 STREET
City-State-Zip: PLANTATION FL 33322**Title** DIRECTOR
Name HOGG, ELAINE
Address 4236 N OCEAN DRIVE
City-State-Zip: HOLLYWOOD FL 33019**Title** VPD
Name WARKENTIEN, DAVE
Address 7315 NW 48 PLACE
City-State-Zip: LAUDERHILL FL 33319**Title** VPD
Name STARR, ALAN
Address 7763 SOUTHAMPTON TERRACE #408
City-State-Zip: TAMARAC FL 33321**Title** SD
Name VISAGE, KRYSTINA
Address 631 MULBERRY LANE
City-State-Zip: DAVY FL 33325**Title** OTHER
Name CHOSID, RICHARD
Address 3110 NE 48 STREET
City-State-Zip: LIGHTHOUSE POINT FL 33064**Title** ASST. TREASURER
Name MOLINA, DIANA
Address 7860 PETERS RD F-100
City-State-Zip: PLANTATION FL 33324**Title** T
Name STOTSKY, ALAN
Address 728 SW 4 ST #1
City-State-Zip: FT LAUDERDALE FL 33312**Continues on page 2**

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: DIANA MOLINA**ASST. TREASURER****02/26/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|------------------------|
| Title | VP, DIRECTOR |
| Name | KELLEHER, BARBRA |
| Address | 2624 TORTUGAS LANE |
| City-State-Zip: | FT LAUDERDALE FL 33309 |