

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002190

Entity Name: NAVY LEAGUE OF THE UNITED STATES, PANAMA CITY-BAY
COUNTY COUNCIL, INC.**FILED**
Jan 08, 2017
Secretary of State
CC3509032574**Current Principal Place of Business:**125 LANDINGS DRIVE
LYNN HAVEN, FL 32444**Current Mailing Address:**P.O. BOX 16091
PANAMA CITY, FL 32406 US**FEI Number: 20-0509700****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SHUTT, CINDY J
125 LANDINGS DRIVE
LYNN HAVEN, FL 32444 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 ASST. TREASURER
Name ACKERLAND, PAMELA P
Address 9515 BLACK BEAR LAND
City-State-Zip: PANAMA CITY FL 32404Title T
Name SHUTT, CINDY J
Address 125 LANDINGS DRIVE
City-State-Zip: LYNN HAVEN FL 32444Title OFFICER
Name STEERE, DAVID C
Address 311 EMERSON DRIVE
City-State-Zip: PANAMA CITY FL 32408Title CORRESPONDING SECRETARY
Name KLOMPS, THOMAS O
Address 614 POINSETTIA COURT
City-State-Zip: PANAMA CITY BEACH FL 32413-2618Title VP
Name WESTON, RICHARD L
Address 3412 W 15TH STREET
City-State-Zip: PANAMA CITY FL 32401-1335Title PRESIDENT
Name MOORE, CHRISTOPHER S
Address 3006 MALONE DR
City-State-Zip: PANAMA CITY FL 32405-3841

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: CINDY J SHUTT**TREASURER****01/08/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date