

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17789

**Entity Name:** NAVAL R.O.T.C. SCHOLARSHIP FUND, INC.**Current Principal Place of Business:**C/O JOEL N. WEBER  
14197 CLASSIQUE WAY  
SAN DIEGO, CA 92129-4333**Current Mailing Address:**C/O JOEL N. WEBER  
14197 CLASSIQUE WAY  
SAN DIEGO, CA 92129-4333 US**FEI Number:** 59-2770205**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SEERY, MARYANN  
2618 BENT HICKORY CIRCLE  
LONGWOOD, FL 32779-3627 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 CHAIRMAN, DIRECTOR  
Name SEERY, MARYANN  
Address 2618 BENT HICKORY CIRCLE  
City-State-Zip: LONGWOOD FL 32779-3627

Title DIRECTOR  
Name GULLIVER, VICTOR S CAPT USN (RET.)  
Address 1900 FRANKLIN DRIVE  
City-State-Zip: GLENVIEW IL 60026-1076

Title TREASURER, DIRECTOR  
Name WEBER, JOEL N CAPT USN (RET.)  
Address 14197 CLASSIQUE WAY  
City-State-Zip: SAN DIEGO CA 92129-4333

Title DIRECTOR  
Name LICUP, KATHERINE E  
Address 226 SOUTH HARVEY AVENUE  
City-State-Zip: OAK PARK IL 60302-3312

Title PRESIDENT, DIRECTOR  
Name PAULOSKI, THOMAS J CDR USNR (RET.)  
Address 885 GREEN BAY ROAD  
City-State-Zip: HIGHLAND PARK IL 60035-4638

Title SECRETARY, DIRECTOR  
Name KASPERSKI, DANIEL C CAPT USNR (RET.)  
Address 835 MORVEN COURT  
City-State-Zip: NAPERVILLE IL 60563-3267

Title DIRECTOR  
Name SHAW, ROBERT E  
Address 1580 SHERMAN AVENUE APT. 304  
City-State-Zip: EVANSTON IL 60201-4482

Title DIRECTOR  
Name JOHNSON, THOR P  
Address ARCAPITA LIMITED  
15 SLOANE SQUARE, SECOND FLOOR  
City-State-Zip: LONDON SW1 W8ER

**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:** JOEL N. WEBER**TREASURER****01/11/2014**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   DIRECTOR  
Name                 MARTIN, EDWARD J CAPT USN (RET.)  
Address             707 HILL ROAD  
City-State-Zip:   WINNETKA IL 60093-3916

Title                   DIRECTOR  
Name                 WESTLAKE , WILLIAM R PHD  
Address             P.O. BOX 2023  
City-State-Zip:   GRANBY CO 80446-2023