## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17789

Entity Name: NAVAL R.O.T.C. SCHOLARSHIP FUND, INC.

**Current Principal Place of Business:** 

2618 BENT HICKORY CIRCLE LONGWOOD. FL 32779-3627

**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:

LILLICH, CHRISTOPHER BRIAN 12226 KENTON WAY BOCA RATON, FL 33428-4822 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: CHRISTOPHER BRIAN LILLICH

01/05/2020

**FILED** Jan 05, 2020

**Secretary of State** 

2085104034CC

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

Title CHAIRMAN, DIRECTOR Title **DIRECTOR** 

Name SEERY, MARYANN Name GULLIVER, VICTOR S CAPT USN

(RET.)

Address 2618 BENT HICKORY CIRCLE Address 1900 FRANKLIN DRIVE

City-State-Zip: LONGWOOD FL 32779-3627 City-State-Zip: GLENVIEW IL 60026-1076

Title TREASURER. DIRECTOR

Title DIRECTOR WEBER, JOEL N CAPT USN (RET.) Name Name LICUP, KATHERINE E

14197 CLASSIQUE WAY Address Address 240 MELBA LANE

City-State-Zip: SAN DIEGO CA 92129-4333 City-State-Zip: HIGHLAND PARK IL 60035-1904

Title PRESIDENT, DIRECTOR Title **DIRECTOR** 

FERRARA, JOHN W Name KASPERSKI, DANIEL C CAPT USNR Name

> 150 EAST 77TH STREET (RET.)

Address APT. 5F Address

NEW YORK NY 10075-1924 City-State-Zip:

City-State-Zip: TUCSON AZ 85739-1484 Title DIRECTOR

Title DIRECTOR SHAW, ROBERT E Name

Name JOHNSEN, THORSTEN P Address 1580 SHERMAN AVENUE

> APT. 304 FIR TREES Address

WEXHAM STREET EVANSTON IL 60201-4482

> City-State-Zip: STOKE POGES SL3 6NA

66691 EAST WILLOW CANYON DRIVE

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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.

01/05/2020 SIGNATURE: JOEL NATHAN WEBER TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title VP, DIRECTOR Title SECRETARY, DIRECTOR

Name FESSLER, E. ANTHONY CAPT, JAGC, USN (RET.) Name FRESE, ROBERT M CDR, USNR (RET.)

Address 1615 BRIARWOOD ROAD Address 879 HAVEN POINT LOOP

City-State-Zip: SHEBOYGAN WI 53083-2151 City-State-Zip: NEW BRAUNFELS TX 78132-4339

Title DIRECTOR

Name LILLICH, CHRISTOPHER B
Address 12226 KENTON WAY

City-State-Zip: BOCA RATON FL 33428-4822