

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90279 014 ****61.25

DOCUMENT # 723017

1. Entity Name
**NAVY LEAGUE OF THE UNITED STATES, FORT
LAUDERDALE COUNCIL, INC.**



Principal Place of Business
**C/O ROSEMARIE DEZOLT
2161 NE 55TH CT
FT. LAUDERDALE, FL 33308 US**

Mailing Address
**2161 NE 55TH CT
FT. LAUDERDALE, FL 33308 US**

20041144



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04152005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1412425

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DEZOLT, ROSEMARIE
2161 NE 55TH CT
FT. LAUDERDALE, FL 33308**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
MADZINSKI, MACK E III
1201 S.W. 63RD AVENUE
PLANTATION, FL 33317 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
KOONTZ, LARRY L
100 NW 114 LANE
POMPANO BEACH, FL 33071 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
LEARY, BRIAN
2870 NE 28TH STREET
FORT LAUDERDALE, FL 33306 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
Mdzinski, Joyce H
1201 SW 63rd Ave
Plantation FL 33317 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
Chosid, Richard G
3110 NE 48th
Lighthouse Point FL 33064 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-452-5157
4-19-05