

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760382

FILED  
Jan 27, 2009  
Secretary of State

**Entity Name:** MARINE GUNNER ANGUS R.GOSS, DETACHMENT MARINE CORPS LEAGUE OF TAMPA, INCORPORATED

**Current Principal Place of Business:**

2700 N. MACDILL AVE  
214  
TAMPA, FL 33607

**New Principal Place of Business:**

2612 N. TAMPA STREET  
TAMPA, FL 33602

**Current Mailing Address:**

P.O. BOX 2439  
TAMPA, FL 33601

**New Mailing Address:**

**FEI Number:** 59-6196501

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COTO, FRANK  
2700 N MACDILL AVE  
213  
TAMPA, FL 33607 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ROSA, FRANK  
Address: 3941 MEADOW LARK COURT  
City-St-Zip: LAND O' LAKES, FL 34639

Title: D (X) Delete  
Name: DE VERA, ARMANDO  
Address: 2424 WEST TAMPA BAY BLVD  
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete  
Name: COTO, FRANK  
Address: 2700 N. MACDILL AVENUE #213  
City-St-Zip: TAMPA, FL 33607

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANK COTO

D

01/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date