FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 770276

NAPLES DETACHMENT - MARINE CORPS LEAGUE, INC.

Principal Place of Business		Mailing Address	-		
P.O. BOX 8982		P.O. BOX 8982			
NAPLES FL 34101		NAPLES FL 34101 US			
US		US			
2. Principal Pl	lace of Business	2a. Mailing Address		3. Date Incorporated or Qualifed	
21		26		09/19/1983	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number Applied For	
22	-	27		23-1598250 Not Applicable	
City & State	e	City & State		5. Certificate of Status Desired	
23		28	.	ree Required	1
Zip	Country	Zip	Country	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
24	9. Name and Address of Current		30	Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent	1
	Name Name	1			
			1 1	Kaddy NAC LONGO	-
WALSH, L.T.			82 St	Street Address (P.O. Box Number is Not Acceptable)	
1096 MORINGSIDE DRIVE			83	11014 2 big onse way	1
NAPLES FL 34103					ł
			84 Ci	City 140/45 FL 85 Zip Code /	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered again, or both, in the State of Norida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am ramiliar with and accept the obligations of Section 617.0503, Florida Statutes.					1
office or r	egistered agent, or both, in the State of	of Florida, Such change was autions of Section 617 0503. Flori	thorized by the i	le corporation's board of directors. I hereby accept the appointment as registered	
SIGNATURE		Lelas		3.3.99	1
SIGNATURE	Signature, typed or printed name of registered agent			ignature required when reinstating) DATE	18
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE		,
NAME	WALSH, L.T.		1.2 NAME	11019/20ngshore way w	3
STREET ADDRESS	1096 MORNINGSIDE DR.		1.3 STREET ADDI	NAME OF TULL	3
CITY-ST-ZIP	NAPLES FL	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	☐ Change ☐ Addition	;
TITLE	SVC BUTTERWORTH, WILLIAM	<i>333</i> 4_/-	2.2 NAME		
NAME STREET ADDRESS			2.3 STREET ADD	DDRESS	
CITY-ST-ZIP	NAPLES FL 34108		2. 4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE	JVD	☐ DELETE	3.1 TITLE	TUC]
NAME — —	-URQUART, JOHN		3.2 NAME	Richard Tasussia	- -
STREET ADDRESS	1395 MORNINGSIDE DR.		3.3 STREET ADD	DDRESS 425 G VIFSLOVE BIND N # 116 ZIP (A) 105 F) 34103	-
CITY-ST-ZIP	NAPLES FL		3.4. CITY-ST-ZIP	ZP PANEC E) TUNZ	1
TITLE	ADJ	☐ DELETE	4,1 TITLE	Addition	
NAME	MACDONAL, RODERICK		4. 2 NAME	Robert Luparello	
STREET ADDRESS	11019 LONGSHORE WAY W		4.3 STREET ADD	DORESS COT & County Cha	
CITY-ST-ZIP	NAPLES FL		4.4 CITY-ST-ZIP		-
TITLE	PM	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition	
NAME	VANHECKE, GERALD		5.2 NAME	200000	
l	ZOO DINIE LAVE DD		5.3 STREET ADD	JUNESS I	1

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 effect 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

☐ DELETE

760 PINE LAKE DR

NAPLES FL 34104

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

FILED

03-10-1999 90068 036 ****61.25

Mar 10, 1999 8:00 am § Secretary of State

Change

☐ Addition