## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#770276**

FILED Jan 05, 2006 Secretary of State

Entity Name: NAPLES DETACHMENT - MARINE CORPS LEAGUE, INC.

**Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 8982 NAPLES, FL 34101 US **Current Mailing Address: New Mailing Address:** P.O. BOX 8982 NAPLES, FL 34101 US FEI Number: 59-1690735 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARSIT, NICK 925 EASTHAM WAY NAPLES, FL 34104 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SHANABARGER, EDWARD I Name: Name: 1301 GRAND CANAL Address: Address: City-St-Zip: NAPLES, FL 34110 City-St-Zip: Title: SVCD Title: () Delete () Change () Addition MARSIT, NICK Name: Name: Address: 925 EASTHAM WAY Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: Title: JVC () Delete Title: JVC (X) Change ( ) Addition LIGHT, JOHN Name: VAN HECKE, GERALD Name: 4708 MAUPITI WAY, ISLAND WALK Address: Address: 760 PINE VALE RD City-St-Zip: NAPLES, FL 34119 City-St-Zip: NAPLES, FL 34104 ( ) Delete Title: ADJ Title: () Change () Addition CONNELLY, JOHN Name: Name: Address: 6648 GLEN ARBOR WAY Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: **PMD** () Delete Title: () Change () Addition VAN ORMAN, GEORGE Name: Name: 26368 MONTGOMERY DRIVE Address: Address: BONITA SPRINGS, FL 34135 City-St-Zip: City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition HAMBLETON, GIFFORD KNEE. ROBERT Name: Name: Address: 220 VINTAGE CIRCLE #402 Address: 3730 5TH AVE SW NAPLES, FL 34119 NAPLES, FL 34117 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: NICK MARSIT SVCD 01/05/2006