## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 16, 2005 8:00 am Secretary of State

1. Entity Name INTRACOASTAL DETACHMENT NO. 1058 MARINE CORPS LEAGUE, INC.							02-16-2005 900	016 008 ****	61.25
Principal Place PO BOX 1124 FT LAUDERD/		-₹~ PO`B(	"Address" DX 11248 UDERDALE, FL 3			1 188 (188 P12 88481 )	11971 SRU1 GS111 GRU1 RB111 23	nu <b>sa</b> n <b>a (2:30 (410 (41</b> 0	INTERNATION
2. Principal Place of Business		3. Mailii	3. Mailing Address						
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.			02122005 CH	ng-NP CR2	2E037 (10/03)	
City & State		City	City & State			4. FEI Number 65-101446	7	<u> </u>	plied For t Applicable
		Zip			Certificate of Status Desired				
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent —				
DAVIS, RICHARD V 4100 GALT OCEAN DR				-	Name Street Address (P.O. Box Number is Not Acceptable)				
APARTMENT 601 FORT LAUDERDALE, FL. 33308			-			V 191 - 31 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
					City			FL Zip Code	<del></del>
	named entity submits this state ions of registered agent.	ment for the purpo	se of changing its	registered	office or registe	ered agent, or both, in	the State of Florida. I	am familiar with,	and accept
SIGNATURE .	Signature, typed or printed name of registe	red agent and title if angli	cable. (NOTE	: Remistered A	gent signature require	of when mineration)	DA	ATE	<del></del>
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Filing Fee is \$61.25 Due by May 1, 2005			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees		heck payable to epartment of St	
10.	OFFICERS A	ND DIRECTORS		11.	_	100171011010101111101	ES TO OFFICERS AND	D DIRECTORS IN	
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NAME	. <del></del>		Delete	TITLE	4 PA		<del></del>	☐ Change	Addition
STREET ADDRESS	JOHNSON, EDWARD M		Delete	TITLE NAME		ST COMMO	ndent		
	1801 TERRAMAR DRIVE		Delete	NAME	Ed		ndent		
CITY-ST-ZIP	· ·			NAME	ADDRESS 18	ST Commen	ndent phuson r Drive		
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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 of trigstee 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: \_

CONATURE AND TYPELOR PROITED NAME OF SIGNON OFFICER OR DIRECTOR

abovery 12, 2005 954-564-6