

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001969

FILED
Mar 23, 2010
Secretary of State

Entity Name: OLDEST CITY DETACHMENT, MARINE CORPS LEAGUE, INC.

Current Principal Place of Business:

1428 A1A SOUTH
SAINT AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1752
SAINT AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 59-2416958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSHER, WALTER W
462 CASUARINA CIR
SAINT AUGUSTINE, FL 32086 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: CMDT
Name: CARCEL, MANNY
Address: 3468 INDIAN CREEK BLVD
City-St-Zip: SAINT JOHNS, FL 32259

Title: SR V
Name: LARSON, LOUIS
Address: 34 SANDPIPER DR
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: JR V
Name: BELLAMY, JAMES
Address: 8550 A1A SOUTH #313
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: JUD
Name: ROBINSON, GREGORY
Address: 967 SALZEDO AVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: ADJ
Name: MAGUIRE, GARY
Address: 1050 ST. MARKS POND BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: PAY
Name: MOSHER, WALTER W
Address: 462 CASUARINA CIR
City-St-Zip: SAINT AUGUSTINE, FL 32086

I hereby 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 all other like empowered.

SIGNATURE: WALTER W. MOSHER

PAY

03/23/2010

Electronic Signature of Signing Officer or Director

Date