

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002918

FILED
Apr 18, 2008
Secretary of State

Entity Name: DANIEL J. DALEY DET. 1002, MARINE CORPS LEAGUE, INC.

Current Principal Place of Business:

3435 SHOAL LINE BLVD
VFW POST 9236
SPRING HILL, FL 34607

New Principal Place of Business:

Current Mailing Address:

POB 5067
SPRING HILL, FL 346115067

New Mailing Address:

FEI Number: 59-3711832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, FRANK
3391 JEWFISH AVENUE
HERNANDO BEACH, FL 34607 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: PD () Delete
Name: HOMAN, LES
Address: 7376 BROAD STREET (US 41)
City-St-Zip: HERNANDO BEACH, FL 34607

Title: VD () Delete
Name: ANDERSON, FRANK K
Address: 3391 JEWFISH AVE.
City-St-Zip: HERNANDEZ BEACH, FL 34607

Title: TD () Delete
Name: SULFRIDGE, BARBARA
Address: 5344 MALDIVE AVE.
City-St-Zip: SPRING HILL, FL 34606

Title: TR () Delete
Name: ROSENBERG, IRWIN
Address: 7487 ALOW DRIVE
City-St-Zip: SPRING HILL, FL 346072420

Title: VD () Delete
Name: SULFRIDGE, ALBERT
Address: 5344 MALDINE AVE
City-St-Zip: SPRING HILL, FL 346061133

Title: TD () Delete
Name: ALAIMO, JOSEPH
Address: 214 CALLOWAY AVE
City-St-Zip: SPRING HILL, FL 346065312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANDERSON, FRANK K
Address: 3391 JEWFISH AVE
City-St-Zip: HERNANDO BEACH, FL 34607

Title: VD (X) Change () Addition
Name: SULFRIDGE, ALBERT
Address: 5344 MALDIVE AVE.
City-St-Zip: SPRING HILL, FL 34606

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

Title: TR (X) Change () Addition
Name: MCQUISTON, JOHN
Address: 9173 ELWOOD RD
City-St-Zip: SPRING HILL, FL 34608

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: BARBARA SULFRIDGE

TD

04/18/2008

Electronic Signature of Signing Officer or Director

Date