2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003587

FILED Jan 03, 2007 Secretary of State

Entity Nar	ne: NAVY MU	ISICIANS ASSOCIATION, INC	.			
Current Principal Place of Business:			New Principal Place of Business:			
	H DELANEY L TY, FL 33565	ANE				
Current M	ailing Addres	s:	New Mailing Address:			
P O BOX 2 PLANT CIT	294 TY, FL 33564					
FEI Number:	31-1805223	FEI Number Applied For ()	FEI Number Not Appl	icable () Ce	ertificate of Status Desired()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New	Registered Agent:	
NAMACK, WILLIAM H III 1800 2ND ST STE 714 SARASOTA, FL 34236 US			NAMACK, WILLIAM H III 5310 DOMINICA CIRCLE SARASOTA, FL 34236 US			
	named entity s of Florida.	submits this statement for the p	ourpose of changing i	ts registered offic	e or registered agent, or both,	
SIGNATUF	RE:				01/03/2007	
	Electron	ic Signature of Registered Ag	ent		Date	
OFFICERS	S AND DIREC	TORS:	ADDITION	S/CHANGES TO	OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	DP () LEKETA, ROBE 2432 TREYSON VIRGINIA BEAC	I TRAIL	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	DV () HOLL, KIM R 2409 DEEPWA VIRGINIA BCH,		Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	DS () CHURCH, DOY 134 DELANEY SUMMERVILLE	CIRCLE	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	DT () STRANGE, CEC 2310 EDITH DE PLANT CITY, FI	LANEY LANE	Title: Name: Address: City-St-Zip:	() Ch	ange () Addition	
Title: Name: Address: City-St-Zip:	D () NAMACK, WILL 1800 2ND ST S SARASOTA, FL	TE 714	Title: Name: Address: City-St-Zip:	D (X) Ch NAMACK, WILLIAN 5310 DOMINICA CI SARASOTA, FL 34	IRCLE	

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: CECIL B STRANGE DT 01/03/2007