


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2008 8:00 am
Secretary of State

02-04-2008 90028 018 ****61.25

DOCUMENT # N02000009576					
1. Entity Name LEATHERNECK LOUNGE, INC.					
Principal Place of Business 8405 SUNSHINE GROVE ROAD BROOKSVILLE, FL 34613			Mailing Address 8405 SUNSHINE GROVE ROAD BROOKSVILLE, FL 34613		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 06-1668251	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SHEVLIN, VINCENT 8444 PHILADELPHIA AVE SPRING HILL, FL 34608			Name Same Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHEVLIN, VINCENT 8444 PHILADELPHIA AVE SPRING HILL, FL 34608	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP YASKULSKI, JOHN 11394 LONG HILL CT BROOKSVILLE, FL 34604	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSS, ROBERT 3441 GATOR TRAIL BROOKSVILLE, FL 34604	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STEADMAN, JAMES 13241 SADDLE WAY BROOKSVILLE, FL 34614	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEAHER, HAROLD 14370 CORONADO DR SPRING HILL, FL 34609	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACFARLANE, LARRY 7214 LANSDALE ST. BROOKSVILLE, FL 34601	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer James Stedman 13241 Saddle Way Brooksville, FL 34614				
<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Joseph Schlosser 5141 Silhouette Ct. Spring Hill, FL 34607-5691				
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Vincent J. Shevlin</i> Vincent Shevlin, Pres/ 1-31-08/ 352-684-3143					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					