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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Marham

Secretary of State * DIVISION OF CORPORATIONS

1996

DOCUMENT # NO2300

(4)

NAVY SEABEE VETERANS OF AMERICA, INCORPORATED, D EPARTMENT OF FLORIDA, INCORPORATED

								# 1481 HON HE	
Principal Place of Business Mailing Address					{¶¶ ¶ QIF ¶¶		8(4 8184) AIBII AIBII B3Q1	/I 418() VIO N (88)	
2346 NE 27 ST LIGHTHOUSE POINT FL 33064 2346 NE 27 ST LIGHTHOUSE POINT FL			33064						
					3. Date Incorporated or Qu 03/30/1984	alified	3a. Date of Las 02/24/		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Ĺ	Applied For	
21		26			37-6049184	37-6049184 Not Applicable			
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desi	ed	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Finan	cing		00 May Be	
23		28			Trust Fund Contribution		Aud	led to Fees	
Zip	Country	Zip	\vdash	intry	This corporation has liab Florida Statutes		tangible tay∕under s I Yes M INo	s. 199.032,	
24	25 29 30 9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
	9. Name and Address of Correct	it negistered Agent		81 Nan			gistores rigorit		
HOFFMAN, RICHARD E.				82 Street Address (P.O. Box Number is Not Acceptable)					
									2346 N.E. 27TH STREET LIGHTHOUSE POINT FL 33064
LIGHTHU	JUSE PUINT FL 33064								
				84 City			FL	Zip Code	
 Pursuant t or register 	o the provisions of Sections 617.0502 ed agent, or both, in the State of Florid	i and 617.1508, Florida Statute da. Such change was authorize	s, the abo d by the	ove-named corporation	corporation submits this statement for 's board of directors. I hereby accept t	the purpi ne appoir	ose of changing its ntment as registere	registered οπίσε ed agent. I am	
familiar wit	h, and accept the obligations of, Secti	on 617.0503, Florida Statutes	1 . 		,		_	_	
SIGNATURE	- gricha	Ve KI HOLY	yna:	γν	re required when reinstating)		DATE		
Signature: typed or printed name of registered agent and little if applicable. V INOTE: Rej 12. OFFICERS AND DIRECTORS				Agent signatu		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
THLE	C	DELETE	11.	ITI F	_,				
NAME	CARDWELL, WILLIAM C.	<i>A</i>	1,2 N		"Trullann 15 H	OF-FI	VAN		
STREET ADDRESS	P. O. BOX 3409 N/A			TREET ADDRES	S 2346 NE 27 ST.				
CHTY-ST-ZIP				ITY-ST-ZIP	LIGHTHOUSE POINT, FL. 33860				
TITLE	V	™ OELETE	2.1 T		Vizi Commander		E J/ Change	Addition	
NAME	BEAKE, FREDERICK A.	7	. 22 N	AME	SUMES LINDENMA	YER	`		
STREET ADDRESS	9458 MISSISSIPPI RUN			TREET ADDRES	1310 NE 15 CANE				
CITY-ST-ZIP	BROOKSVILLE FL 34613		/	CITY-ST-ZIP	CAPE CORAL, FL.	33	064		
TITLE	C	X DELETE	3.1 T		TOEASURER.		∑ Change	Addition	
NAME	OWENS, EUGENE	/	3.2 N	AME -	STACEDH YAHARE	41			
STREET ADDRESS	391 BUCKNELL ROAD		338	TREET ADDRES		•			
CITY - ST - ZIP	VENICE FL 34293		3.4.	DITY-ST-ZIP	NEW PERT RICHE	8, 1	2. 34633)	
TITLE	TD	DELETE	4.1 T	ITLE			Change	Addition	
NAME	KEANE, HUGH	SAME	4. 2	NAME					
STREET ADDRESS	8349 S. VIRGINIA AVE.	SAIN	4.3 9	TREET ADDRES	s				
CITY-ST-ZIP	LAKE PARK FL 33418		4.4 0	ITY-ST-ZIP			<u></u>		
TITLE	D	DELETE	5.1 T				Change	Addition	
NAME	PAPPAS, ANDREW J	SAMÉ	5.2 1						
STREET ADDRESS	10814 HANNAWAY DR E	>1411	5.3 5	TREET ADDRES	s				
CITY-ST-ZIP	RIVERVIEW FL 33569		_	ITY-ST-ZIP					
TITLE	C	DELETE	6.11		600001 -03/19/96- ***61,25	74	93760	e 🔲 Addition	
NAME	GILBERT, JAMES	SAMÉ		IAME	-03/19/96-	-0107	78035 .	95	
STREET ADDRESS	8592 MARS DR.	J11 17	6.3 5	TREET ADDRES	***61,25			フロン	
CITY-ST-ZIP	PENSACOLA FL 32507		6.4 (ITY-ST-ZIP			17/0\(\d) Florido Ptot		

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 12 or Block 18 1 changed, or on an attachment with an address.

SIGNATURE:

305-943-3314 Desired Prone #

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