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NONPROFIT CORPORATION AKNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Myrtham *

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

N02300

(4)

NAVY SEABEE VETERANS OF AMERICA, INCORPORATED, D

FILED Mar 31 1998 8:00am Secretary of State

EPARTMENT OF FLORIDA, INCORPORATED							
Principal Place of Business Mailing Address					T 100KIND OFF OURIO HADD HAND SHAN DOWN OFFIR DIGHT GIGHT GIGHT GRANT GIGHT GARLE GARLE (100)		
1431 8 OCEAN BLVD		1431 S OCEAN BLVD		3. Date Incorporated or Qualified	- Wall		
62 Pompano Bol	4 CL 990C0	62			03/30/1984		
US	1 FL 33062	POMPANO BCH FL 33062 US			4. FEI Number	Applied For	
					37-6049184	Not Applicable	
 • • • • • • • • • • • • • • • • • • •		2a. Mailing Address	Address		5. Certificate of Status Desired		
21 26 Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>			Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
City & State		City & State			7. Is this nonprofit corporation a homeowners association?		
23		28			☐ Ye		
Zip			Country		B. This corporation owes or has paid the		
24	25	29 30	<u>oj , , , , , , , , , , , , , , , , , , ,</u>		Personal Property Tax due June 30.	Yes Mo	
	9. Name and Address of Curre	ur vedistelen võeur	81	Name	10. Name and Address of New Regist	ered Agent	
HOCCAN	N NOUND F			INATIRO			
HOFFMAN, RICHARD E. 1431 S OCEAN BLVD 62 POMPANO BCH FL 33062			62	Street	Address (P.O. Box Number is Not Acceptable)		
			63				
1 01/11 14	10 001112 00302		84	City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statutes,	the above	-nameo	corporation submits this statement for the purpo	ose of changing its registered	
agent. I a	registered agent, or both, in the Stati am familiar with, and accept the jobily	e of Florida. Such change was aut pations of, Section 617.0503, Floric	norized by la Statutes	the cor	poretion's board of directors. I hereby accept the	e appointment as registered	
SIGNATURE	Kichard E. Hol	tman			3-9.	-98	
12.	Signature, typed or printed name of registered ac	ont and title if applicable. (NOTE: R NO DIRECTORS		nt signaturi	e required when reinstating) D	ATÉ	
TITLE	OFFICENS AI	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change Addition	
NAME	HOFFMAN, RICHARD	(change address)	1.2 NAME		HOFFMAN, RICHARD Address 1431 5. CRAN BLUD. HGZ		
STREET ADDRESS			1.3 STREET ADDRESS		1421 & SCEAN BLUD. HGZ	•	
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064		1.4 CITY-ST-ZIP		POMPANO BEACH, FL. 330	062	
TITLE			2.1 TITLE				
NAME	LINDĚŇMAYER, JAMES		2.2 NAME	22 NAME			
STREET ADDRESS	4444 117 44 4 117		2.3 STREET ADDRESS				
CITY-ST-ZIP	CAPE CORAL FL 33064		2.4 CITY-S	T-ZIP			
TITLE	T	DELETE Change	3.1 TITLE		TYANARELLA, Joseph FORMY MAGICA	Change	
NAME OTOGET + DODGES	YAHARELLA, JOSEPH	speeling	3.2 NAME		YAHAKELLY, Joseph	Spelling	
STREET ADDRESS	7958 ADEN LOOP	. ,	3.3 STREET	ADDRESS	(same)	·	
CITY-ST-ZIP TITLE	NEW PORT RICHEY FL 3465	DELETE	3.4. CITY - S 4.1 TITLE	I-ZIP	n	☐ Change ☑ Addition	
NAME	KEANE, HUGH		4.2 NAME		ROBERT MAGIC	- Shango - A Notition	
STREET ADDRESS	8349 S. VIRGINIA AVE.		4.3 STREET		425 M. 3704 AVE		
CITY-ST-ZIP	LAKE PARK FL 33418		4.4 CITY - S1		HOLLYWOOD, FC. 33021	•	
TITLE	D	DELETE	5.1 TITLE		C***	☐ Chylege ZXAddition	
NAME	PAPPAS, ANDREW J	′`	5.2 NAME		WILLIAM CARDWELL NP. O. BOX 3409 NA	dh e la	
STREET ADDRESS 10814 HANNAWAY DR E			5.3 STREET ADDRESS		NP. O.BOX 3409 104	<i>YOYY</i>	
CITY-ST-ZIP	RIVERVIEW FL 33569		5.4 C/TY-ST	- ZiP	RIVERVIEW, FL. 33568		
TITLE	<u> </u>	DELETE	6.1 TITLE		200002474		
NAME	GILBERT, JAMES		6.2 NAME		-04/01/9801010-	003	
STREET ADDRESS	8502 MARS OR		6 2 STREET	AUDDECC	ቀቀቀበተ ጎር		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 12 or Block 13 if changes, or on an attachment with an address. 2 4 00