2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010661

FILED Mar 21, 2009 Secretary of State

Entity Name: UNITED STATES MARINE CORPS LEAGUE INCORPORATED

Current Principal Place of Business: New Principal Place of Business: PO BOX 390722 546 WINONA DRIVE DELTONA, FL 327390772 GENEVA, FL 32732 **Current Mailing Address: New Mailing Address:** PO BOX 390722 DELTONA, FL 327390772 FEI Number: 59-3719569 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BYXBE, JIM 2441 TIMBERCREST DR. DELTONA, FL 32738 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BYXBE, JIM HENDRYX, BRUCE Name: Name: 2441 TIMBERCREST DR Address: 546 WINONA DR Address: City-St-Zip: DELTONA, FL 32738 City-St-Zip: GENEVA, FL 32732 Title: Title: CH (X) Change () Addition () Delete VANCE, CHRISTOPHER Name: VANCE, CHRISTOPHER Name: Address: 907 IRON BEND TRAIL Address: 907 IRON BEND TRAIL City-St-Zip: OSTEEN, FL 32764 City-St-Zip: OSTEEN, FL 32764 Title: () Delete Title: ACMD (X) Change () Addition HENDRYX, BRUCE WAITE, ROBERT Name: Name: 4133 MENDENWOOD LN Address: 546 WINONA DR. Address: City-St-Zip: GENEVA, FL 32732 City-St-Zip: ORLANDO, FL 32826 Title: JAO () Delete Title: () Change () Addition Name: HAGUE, WILLIAM Name: Address: 1146 GAGE AVE. Address: City-St-Zip: DELTONA, FL 32738 City-St-Zip: Title: () Delete Title: () Change () Addition THOMAS, FRANCIS L Name: Name: 201 WOODTRAIL Address: Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip: Title: () Delete Title: (X) Change () Addition COTTEN, MARION L COTTEN, MARION Name: Name: Address: 2072 ALAMEDA DR Address: 2072 ALAMEDA DR DELTONA, FL 32738 DELTONA, FL 327384874 City-St-Zip: 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: MARION L. COTTEN ADJ 03/21/2009