## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

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## **Secretary of State** DOCUMENT # N04000002190 02-21-2007 90020 012 \*\*\*\*61.25 1. Entity Name NAVÝ LEAGUE OF THE UNITED STATES, PANAMA CITY-BAY COUNTY COUNCIL, INC. Principal Place of Business Mailing Address P.O. BOX 16091 P.O. BOX 16091 60017239 PANAMA CITY, FL 32406--609 US PANAMA CITY, FL 32406--609 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122007 Chg-NP CR2E037 (12/06) 4. FEI Number 20-0509700 City & State City & State Applied For Not Applicable Country Zip Country Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent James C. Morris HUNTER, ANDREW A Street Address (P.O. Box Number is Not Acceptable) 3250 GREENTREE CIRCLE PANAMA CITY, FL 32405 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. 15 Ian 2007 SIGNATURE (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing \$5.00 May Be Make check payable to Filips Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. X Delete TITLE X Change ☐ Addition TITLE James C Morris 1301 East 11th Street HUNTER, ANDREW A NAME NAME **3750 GREENTREE CIRCLE** STREET ADDRESS STREET ADDRESS Panama C PANAMA CITY, FL 32405 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition SHUTT, CINDY NAME NAME STREET ADDRESS 125 LANDINGS DRIVE STREET ADDRESS LYNN HAVEN, FL 32444 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition STEERE, DAVID C NAME NAME 311 EMERSON DRIVE STREET ADDRESS STREET ADDRESS PANAMA CITY, FL 32408 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE 5 Thomas O. Klomps 614 Poinsetta Court NAME NAME STREET ADDRESS STREET ADDRESS Parama City Beach, Fl CITY-ST-ZIP CITY-ST-ZIP 32413-2618 ☐ Addition TITLE ☐ Delete TOLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP 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.

FILED

Feb 21, 2007 8:00 am