

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05246

FILED  
Feb 13, 2009  
Secretary of State

**Entity Name:** DEPARTMENT OF FLORIDA, INC. OF THE MARINE CORPS LEAGUE

**Current Principal Place of Business:**

10312 CALLE DE FLORES DR.  
CLERMONT, FL 34711 US

**New Principal Place of Business:**

**Current Mailing Address:**

10312 CALLE DE FLORES DR.  
CLERMONT, FL 34711 US

**New Mailing Address:**

**FEI Number:** 75-3020041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOOTH, RICHARD  
1755 SWEETWATER W. CIRCLE  
APOPKA, FL 32712 US

**Name and Address of New Registered Agent:**

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:**

Title: DC ( ) Delete  
Name: BOOTH, RICHARD W  
Address: 1755 SWEETWATER WEST CIRCLE  
City-St-Zip: APOPKA, FL 32712 US

Title: DSVC ( ) Delete  
Name: SARGENT, DAVE  
Address: 2270 GRIFFIN RD.  
City-St-Zip: LAKELAND, FL 33810 US

Title: DJVC ( ) Delete  
Name: BACKES, WILLIAM  
Address: 1705 SW 157TH PLACE RD.  
City-St-Zip: OCALA, FL 34473

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WILLIS J. MAHER

TREA

02/13/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date