

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000013059

FILED
Mar 03, 2009
Secretary of State

Entity Name: WILDWOOD LEATHERNECK DETACHMENT #1240, INC.

Current Principal Place of Business:

75 CONTINENTAL BLVD.
WILDWOOD, FL 34785

New Principal Place of Business:

3610 WESTOVER CIRCLE
LEESBURG, FL 34748

Current Mailing Address:

P.O. BOX 1513
WILDWOOD, FL 34785

New Mailing Address:

FEI Number: 01-0865529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EISLER, JOHN P
831 JANET ST.
WILDWOOD, FL 34785 US

Name and Address of New Registered Agent:

ENGEL, CARL R
25718 BELLE ALLIANCE
LEESBURG, FL 34748 US

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: CARL R. ENGEL

03/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: ENGEL, CARL
Address: 25718 BELLE ALLIANCE
City-St-Zip: LEESBURG, FL 34748

Title: VC () Delete
Name: PASANCHIN, CHARLES
Address: 24943 NAVEL AVE.
City-St-Zip: LEESBURG, FL 34748

Title: JVC () Delete
Name: LOERZEL, STANLEY
Address: 925 EAGLE LANDING
City-St-Zip: LEESBURG, FL 34748

Title: JA () Delete
Name: MINCER, ANDY A
Address: 25343 CRANES ROOST CIRCLE
City-St-Zip: LEESBURG, FL 34748

Title: PM () Delete
Name: SHRIVER, JAMES E
Address: 821 OAKWOOD CIRCLE
City-St-Zip: WILDWOOD, FL 347855366 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: ENGEL, CARL R
Address: 25718 BELLE ALLIANCE
City-St-Zip: LEESBURG, FL 34748

Title: VC (X) Change () Addition
Name: PASANCHIN, CHARLES M
Address: 24943 NAVEL AVE.
City-St-Zip: LEESBURG, FL 34748

Title: JVC (X) Change () Addition
Name: LOERZEL, STANLEY F
Address: 952 EAGLES LANDING
City-St-Zip: LEESBURG, FL 34748

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: JAMES E. SHRIVER

PM

03/03/2009

Electronic Signature of Signing Officer or Director

Date