

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06680

FILED  
Apr 26, 2008  
Secretary of State

Entity Name: MARINE CORPS LEAGUE BREVARD COUNTY DETACHMENT, INC.

**Current Principal Place of Business:**

211 CAROLINE ST  
K-7  
CAPE CANAVERAL, FL 32920

**New Principal Place of Business:**

**Current Mailing Address:**

211 CAROLINE ST  
K-7  
CAPE CANAVERAL, FL 32920

**New Mailing Address:**

FEI Number: 59-2572282      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CARTER, RICHARD P  
211 CAROLINE ST K-7  
CAPE CANAVERAL, FL 32920      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: D      ( ) Delete  
Name: RYAN, RON  
Address: 652 CASA GRANDE DR  
City-St-Zip: MELBOURNE, FL 32940

Title: D      ( ) Delete  
Name: BRYAN, JAMES J  
Address: 4301 LINGUSTRIM DR  
City-St-Zip: MELBOURNE, FL 32934

Title: S      ( ) Delete  
Name: BEVAN, MARY  
Address: 2125 GOLD ISLE DR # 1423  
City-St-Zip: MELBOURNE, FL 32935

Title: P      ( ) Delete  
Name: BEVAN, MARY  
Address: 2125 GOLD ISLE DR #1423  
City-St-Zip: MELBOURNE, FL 32935

Title: D      ( ) Delete  
Name: HAMPTON, HERMAN T  
Address: 2608 SADLER LANE  
City-St-Zip: MELBOURNE, FL 32935

**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:

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: MARY BEVAN

P

04/26/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date