

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25433

FILED
Jul 24, 2008
Secretary of State

Entity Name: NAVY SEA BEE VETERANS ISLAND X12, INC.

Current Principal Place of Business:

1282 ESSEX DRIVE
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

1282 ESSEX DRIVE
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 36-3382061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WURSTER, CYNTHIA
1282 ESSEX DRIVE
WELLINGTON, FL 33414 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: PD () Delete
Name: NAPIER, JAMES N JR
Address: 14539 63RD CT N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VD () Delete
Name: STUFFER, ADOLPH
Address: 6304 SILVER MOON LN
City-St-Zip: LAKE WORTH, FL 33463

Title: VD () Delete
Name: SHANKLIN, EDWARD
Address: 2286 LAKE OSBORNE DR, APT 2
City-St-Zip: LAKE WORTH, FL 33461

Title: TD () Delete
Name: EDWARDS, WILLIAM
Address: 5600 N FLAGLER DR, APT 1907
City-St-Zip: WEST PALM BEACH, FL

Title: TD () Delete
Name: WURSTER, CYNTHIA
Address: 1282 ESSEX DR
City-St-Zip: WELLINGTON, FL 33414

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: CYNTHIA WURSTER

TD

07/24/2008

Electronic Signature of Signing Officer or Director

_____ Date