

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N30161

**FILED**  
**Jan 09, 2010**  
**Secretary of State**

**Entity Name:** NORTH LAKE DETACHMENT MARINE CORPS LEAGUE, INC.

**Current Principal Place of Business:**

2240 MARCELLA WAY  
LEESBURG, FL 34749

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 493541  
LEESBURG, FL 34749

**New Mailing Address:**

**FEI Number:** 59-2932916

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOWLING, FREDERICK  
527 CHULA VISTA AVE  
THE VILLAGES, FL 32159 US

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

SOVERN, WILLIAM J  
355 CARRIAGE LN  
LADY LAKE, FL 32159 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: WILLIAM J. SOVERN

01/09/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PM  
Name: SOVERN, WILLIAM J  
Address: 355 CARRIAGE LN  
City-St-Zip: LADY LAKE, FL 32159

Title: FV  
Name: EDWARDS, DANIEL A  
Address: 2350 AMBLER CR.  
City-St-Zip: THE VILLAGES, FL 32162

Title: SV  
Name: HUNTZINGER, JAMES P  
Address: 1007 SMYRNA  
City-St-Zip: THE VILLAGES, FL 32162

Title: JA  
Name: BRADFORD, JAMES C  
Address: 101 AVOCADO COVE  
City-St-Zip: LEESBURG, FL 347483139

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM J. SOVERN

PM

01/09/2010

Electronic Signature of Signing Officer or Director

Date