

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37239

FILED
May 01, 2004
Secretary of State**Entity Name:** NAVY LEAGUE OF THE UNITED STATES, BROWARD COUNTY, FLORIDA COUNCIL, INC.**Current Principal Place of Business:**MR. SID WALDFOGEL
1200 ORANGE ISLE
FORT LAUDERDALE, FL 33315**New Principal Place of Business:**MARGARET RABEN
1200 ORANGE ISLE
FORT LAUDERDALE, FL 33315**Current Mailing Address:**MR. SID WALDFOGEL
1200 ORANGE ISLE
FORT LAUDERDALE, FL 33315**New Mailing Address:**MARGARET RABEN
1200 ORANGE ISLE
FORT LAUDERDALE, FL 33315**FEI Number:** 65-0179407**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RABEN, MARGARET
1200 ORANGE ISLE
FORT LAUDERDALE, FL 33315**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:** P () Delete
Name: BANNISTER, DONALD
Address: 4922 NW 66 STREET
City-St-Zip: FORT LAUDERDALE, FL 33319**Title:** JAD () Delete
Name: RUMIN, EDWARD R
Address: 2720 E. OAKLAND PARK BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33306**Title:** VPD () Delete
Name: OTT, LARRY
Address: P.O BOX 39252
City-St-Zip: FORT LAUDERDALE, FL 333399252**Title:** VPD () Delete
Name: HEIN, ROBERT
Address: P.O BOX 39252
City-St-Zip: FORT LAUDERDALE, FL 333399252**Title:** TD () Delete
Name: RABEN, MARGARET
Address: 1200 ORANGE ISLE
City-St-Zip: FORT LAUDERDALE, FL 33315**Title:** SD () Delete
Name: GIAMBRONE, MARIANNE
Address: 1546 BARCELONA WAY
City-St-Zip: WESTON, FL 33327**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
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Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARGARET RABEN

TD

05/01/2004

Electronic Signature of Signing Officer or Director

Date