

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

04-29-2002 90168 032 ****61.25

DOCUMENT # N44742

1. Entity Name

MARINE CORPS LEAGUE - CHARLOTTE DETACHMENT, INC.

Principal Place of Business

Mailing Address

P.O. BOX 1948
 PO BOX 511948
 PUNTA GORDA FL 33951
 US

PO BOX 511948
 PUNTA GORDA FL 33951
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RING, EDWIN R
27204 PASADENA DR
PUNTA GORDA FL 33955-2307

Name

Thient, Ralph H.

Street Address (P.O. Box Number is Not Acceptable)

1410 Kenmore St.

City

Port Charlotte, FL

FL

Zip Code

33952

8. 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

Ralph H. Thient

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/13/02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VPD** ☒ Delete
 NAME **QUICK, JOE**
 STREET ADDRESS **1489 HARBOR BLVD**
 CITY-ST-ZIP **PORT CHARLOTTE FL 33952-4483**

TITLE **VPD** ☒ Change ☐ Addition
 NAME **Thient, Ralph H.**
 STREET ADDRESS **1410 Kenmore St.**
 CITY-ST-ZIP **Port Charlotte, FL 33952**

TITLE **VPD** ☐ Delete
 NAME **KISH, RAYMOND E**
 STREET ADDRESS **25412 BADETTE CT**
 CITY-ST-ZIP **PUNTA GORDA FL 33983**

TITLE **VPD** ☐ Change ☐ Addition
 NAME **Thient, Ralph H.**
 STREET ADDRESS **1410 Kenmore St.**
 CITY-ST-ZIP **Port Charlotte, FL 33952**

TITLE **TD** ☒ Delete
 NAME **CROSS, DONALD**
 STREET ADDRESS **26183 TOCANTINES CT**
 CITY-ST-ZIP **PUNTA GORDA FL 33982**

TITLE **TD** ☒ Change ☐ Addition
 NAME **Holland, Russell E.**
 STREET ADDRESS **1031 Messina Dr.**
 CITY-ST-ZIP **Punta Gorda, FL 33960**

TITLE **SD** ☐ Delete
 NAME **COHIN, DANIEL A JR**
 STREET ADDRESS **1436 PROPER ST**
 CITY-ST-ZIP **PORT CHARLOTTE FL 33952**

TITLE **SD** ☐ Change ☐ Addition
 NAME **Collins, Daniel A. Jr.**
 STREET ADDRESS **1436 Proper St.**
 CITY-ST-ZIP **Port Charlotte, FL 33952**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ralph H. Thient
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/02

Date

941-6323741

Daytime Phone #

CR2E037 (9/01)