

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90107 041 ****61.25

DOCUMENT # N95000005189

1. Entity Name
NAVY LEAGUE OF THE UNITED STATES CLEARWATER
COUNCIL, INC.



Principal Place of Business
3634 DURALST
PALM HARBOR, FL 34684 US

Mailing Address
PO BOX 6122
PALM HARBOR, FL 34684

50010910

2. Principal Place of Business
7574 Cumberland CT.
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.



04042006 Chg-NP CR2E037 (11/05)

City & State
Largo FL

City & State

4. FEI Number
59-3369479

Applied For
Not Applicable

Zip Country
33777 Pinellas

Zip Country

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

PUCI, LEONARD G
2406 SUMMERLIN DR.
CLEARWATER, FL 33764

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee \$501.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	GROTSKY, PETER	
STREET ADDRESS	3634 DURAL ST	
CITY-ST-ZIP	PALM HARBOR, FL 34685	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	KING, MONROE J	
STREET ADDRESS	7574 CUMBERLAND CT	
CITY-ST-ZIP	LARGO, FL 33777	
TITLE	T	<input type="checkbox"/> Delete
NAME	ROSKO, JOHN	
STREET ADDRESS	220 PINE ROAD	
CITY-ST-ZIP	BELLEAIR, FL 33756	
TITLE	S	<input type="checkbox"/> Delete
NAME	KING, BARBARA	
STREET ADDRESS	7574 CUMBERLAND COURT	
CITY-ST-ZIP	LARGO, FL 33777	
TITLE	JA	<input type="checkbox"/> Delete
NAME	PUCI, G. LEONARD	
STREET ADDRESS	2406 SUMMERLIN DRIVE	
CITY-ST-ZIP	CLEARWATER, FL 33764	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	BRIGHTMAN, LOIS	
STREET ADDRESS	100 BLUFF VIEW DR	
CITY-ST-ZIP	BELLEAIR BLUFFS, FL 33756	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	King, Monroe J.	
STREET ADDRESS	7574 Cumberland CT.	
CITY-ST-ZIP	Largo FL 33777	
TITLE	Schott, George H.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2581 Indigo Dr.	
STREET ADDRESS	Dunedin FL 34698	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	MURRAY, William S.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1451 Stewart Blvd.	
STREET ADDRESS	Clearwater FL 33764	
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *G. Leonard Pucci* G. Leonard Pucci

4/6/06

(727) 531-8026

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #