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FILED

May 16 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 702826 (9)

1. Corporation Name

TARPON SPRINGS POWER SQUADRON, INC.

Principal Place of Business

Mailing Address

BAYWOOD VILLAGE CLUB
305 WESTWINDS DR
PALM HARBOR FL 346831816 GEORGIA AVE
PALM HARBOR FL 34683-47233. Date Incorporated or Qualified
08/25/19613a. Date of Last Report
04/28/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

4. FEI Number

59-0152365

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LASHO, JANICE
1816 GEORGIA AVE
PALM HARBOR FL 34683

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Janice C. Lasho

(NOTE: Registered Agent signature required when reinstating)

April 4th 1997

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☒ DELETE
NAME	HARRIS, HOMER E	
STREET ADDRESS	102 SCHOONER DR	
CITY - ST - ZIP	PALM HARBOR FL 34689	

1.1 TITLE		☒ Change ☐ Addition
1.2 NAME	RUBEN B. LEE	
1.3 STREET ADDRESS	4933 ANCHOR WAY	
1.4 CITY - ST - ZIP	NEW PORT RICHEY, FL. 34652	

TITLE	D	☒ DELETE
NAME	HAMMER, LEO E	
STREET ADDRESS	8803 BOYER CT	
CITY - ST - ZIP	HUDSON FL 34667	

2.1 TITLE	D	☒ Change ☐ Addition
2.2 NAME	ELLEN M. TANNER	
2.3 STREET ADDRESS	3215 DARLINGTON ROAD	
2.4 CITY - ST - ZIP	HOLIDAY, FL. 34691	

TITLE	TD	☐ DELETE
NAME	LASHO, JANICE	
STREET ADDRESS	1816 GEORGIA AVE	
CITY - ST - ZIP	PALM HARBOR FL 34683	

3.1 TITLE	TD	☐ Change ☐ Addition
3.2 NAME	JANICE C. LASHO	
3.3 STREET ADDRESS	1816 GEORGIA AVE.	
3.4 CITY - ST - ZIP	PALM HARBOR, FL. 34683	

TITLE	D	☒ DELETE
NAME	LEE, RUBEN B.	
STREET ADDRESS	4933 ANCHOR WAY	
CITY - ST - ZIP	NEW PORT RICHEY FL	

4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	HARRY E. JEHL	
4.3 STREET ADDRESS	6626 TOWER DRIVE	
4.4 CITY - ST - ZIP	HUDSON, FL. 34667	

TITLE	SD	☒ DELETE
NAME	OLSEN, RICHARD E.	
STREET ADDRESS	1850 GEORGIA AVE	
CITY - ST - ZIP	PALM HARBOR FL	

5.1 TITLE	SD	☒ Change ☐ Addition
5.2 NAME	ROBERT L. ZILAY	
5.3 STREET ADDRESS	P.O. Box 3906 6206 STAUNTON DR.	
5.4 CITY - ST - ZIP	HOLIDAY, FL. 34690	

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

Janice C. Lasho

Janice C. Lasho April 4, 1997 (813) 787-4737

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Time Phone # 068706

CR2E037 (9/96)