

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90085 029 ****61.25

DOCUMENT # 702826

1. Entity Name

ANCLOTE KEY SAIL AND POWER SQUADRON, INC.



Principal Place of Business

**BAYWOOD VILLAGE CLUB
305 WESTWINDS DR
PALM HARBOR FL 34683**

Mailing Address

**2417 GROVE RIDGE DR
PALM HARBOR FL 34683**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0152365**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MIELKE, MARY LOU
2417 GROVE RIDGE DR
PALM HARBOR FL 34683**

Name **GEORGE C. PRATT**

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

90 HIGHLAND AVE S 413-B

City

TARPON SPRINGS

FL

Zip Code

34689

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

GEORGE C. PRATT
George C. Pratt

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

(NOTE: Registered Agent signature required when reinstating)

3/29/03
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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Delete
NAME	MIELKE, HOWARD	
STREET ADDRESS	2417 GROVE RIDGE DRIVE	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE	D	☐ Delete
NAME	NEEF, WILLIAM	
STREET ADDRESS	502 S FLORIDA AVENUE, #135	
CITY-ST-ZIP	TARPON SPRINGS FL 34689-2726	
TITLE	D	☐ Delete
NAME	LINDEMAN, BERNARD	
STREET ADDRESS	103 DRIFTWOOD DRIVE WEST	
CITY-ST-ZIP	PALM HARBOR FL 34683-1014	
TITLE	S	☒ Delete
NAME	NEEF, LOIS	
STREET ADDRESS	502 S FLORIDA AVENUE, #135	
CITY-ST-ZIP	TARPON SPRINGS FL 34689-2726	
TITLE	T	☒ Delete
NAME	MIELKE, MARY LOU	
STREET ADDRESS	2417 GROVE RIDGE DR	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	T	☐ Change ☒ Addition
NAME	GEORGE C. PRATT	
STREET ADDRESS	90 HIGHLAND AVE S 413-B	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE	SECRETARY	☐ Change ☒ Addition
NAME	STEVE THORP	
STREET ADDRESS	5060 PROPOISE PL	
CITY-ST-ZIP	NEW PORT RICHEY, FL 34689	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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: **GEORGE C. PRATT** *George C. Pratt* **3/29/03** **942-667**

CR2E037 (10/02)