

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90035 014 ****70.00

DOCUMENT # 714143

1. Entity Name

COCOA BEACH POWER SQUADRON, INC.

Principal Place of Business

Mailing Address

32 YAWL DRIVE
 COCOA BEACH FL 32931
 US

32 YAWL DRIVE
 COCOA BEACH FL 32931
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3008037

Applied For

Not Applicable

Zip

Country

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

HANCE, DONALD R
32 YAWL DRIVE
COCOA BEACH FL 32931-2625

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.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

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: Delete
 NAME: **P KYDD, EDWARD M**
 STREET ADDRESS: **1006 SPRING FIELD COURT**
 CITY-ST-ZIP: **ROCKLEDGE FL 32955-4413**

TITLE: Change Addition
 NAME: **P/D VALENTINE, JOHN B**
 STREET ADDRESS: **2170 HEDGEROW DRIVE**
 CITY-ST-ZIP: **MERRITT ISLAND, FL 32953-2620**

TITLE: Delete
 NAME: **VP VALENTINE, JOHN B**
 STREET ADDRESS: **2170 HEDGEROW DRIVE**
 CITY-ST-ZIP: **MERRITT ISLAND FL 32953-2620**

TITLE: Change Addition
 NAME: **VP/D TRIBUT, LESTER P**
 STREET ADDRESS: **906 JEFFERSON ROAD**
 CITY-ST-ZIP: **ROCKLEDGE, FL 32955-3510**

TITLE: Delete
 NAME: **S BRYANT, DONALD**
 STREET ADDRESS: **850 S. BANANA RIVER DRIVE**
 CITY-ST-ZIP: **MERRITT ISLAND FL 32952-2715**

TITLE: Change Addition
 NAME: **S/D FILLIE, RICHARD D.**
 STREET ADDRESS: **40 YACHT HAVEN DRIVE**
 CITY-ST-ZIP: **COCOA BEACH, FL 32931**

TITLE: Delete
 NAME: **T HANCE, DONALD R**
 STREET ADDRESS: **32 YAWL DRIVE**
 CITY-ST-ZIP: **COCOA BEACH FL 32931**

TITLE: Change Addition
 NAME: **T/D**

TITLE: Delete
 NAME: **D SEIBERT, CHARLES J**
 STREET ADDRESS: **430 ARTEMIS BOULEVARD**
 CITY-ST-ZIP: **MERRITT ISLAND FL 32953**

TITLE: Change Addition
 NAME: **D FLANNERY, ROBERT F**
 STREET ADDRESS: **1490 HOLLY AVENUE**
 CITY-ST-ZIP: **MERRITT ISLAND, FL 32952-5000**

TITLE: Delete
 NAME: **D MCGAVIN, LLOYD E**
 STREET ADDRESS: **1791 BAYSHORE DRIVE**
 CITY-ST-ZIP: **COCOA BEACH FL 32931-2313**

TITLE: Change Addition
 NAME: **D. YOUNG, CHET E.**
 STREET ADDRESS: **4 WALAPEG ROAD**
 CITY-ST-ZIP: **INDIAN HARBOR BEACH, FL 32937**

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: SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **4/21/01** Daytime Phone #: **(321) 783-5455**

CR2E037 (10/00)