2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 18, 2007 8:00 am
Secretary of State
04-16-2007 90043 030 ****61.25

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02162007 Chg-NP CR2E037 (12/06)

DOCUMENT # 722735

1. Entity Name
FLOTILLA 92 NORTH PORT, INC.

Principal Place of Business	Mailing Address
MARINA PARK, CHANCELLOR BLVD. P.O. BOX 7204 NORTH PORT, FL 34287	MARINA PARK, CHANCELLOR BLVD. P.O. BOX 7204 NORTH PORT, FL 34287

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
7030 Chancellor Blvd.	Flotilla 92, Inc.
Suite, Apt. #, etc. -	Suite, Apt. #, etc. P. O. Box 7204
City & State North Port, FL 34287	City & State North Port, FL 34287
Zip / Country 34287 / U.S.A.	Zip / Country 34287 / U.S.A.

4. FEI Number
59-1458960
☐ 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
HANCOCK, DAVID R 2527 PORTAGO LN. NORTH PORT, FL 34286	Name: Paul J. LeBlanc Street Address (P.O. Box Number is Not Acceptable): 2304 Pellam Blvd. City: Port Charlotte, FL Zip Code: 33948

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: Paul J. LeBlanc Pres 4-11-7
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when necessary) DATE

Filing Fee is $61.25
Due by May 1, 2007

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HANCOCK, DAVID R 2527 PORTAGO LN NORTH PORT, FL 34206	☒ Delete	PD HAMILTON JAMES R 3428 TONKIN DR NORTH PORT FL 34287	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LEBLANC, PAUL J 2304 PELLAM BLVD PORT CHARLOTTE, FL 33948	☒ Delete	VD FREY ELIZABETH B 4451 GARDNER DR PORT CHARLOTTE FL 33952	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WARD, BRADLEY W 24325 HARBORVIEW RD 7D PORT CHARLOTTE, FL 33980	☒ Delete	TD WARD BRADLEY W 24325 HARBORVIEW RD PORT CHARLOTTE FL 33980	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LEBLANC, DENISE A 2304 PELLAM BLVD PORT CHARLOTTE, FL 33948	☒ Delete	S LEBLANC DENISE A 2304 PELLAM BLVD PORT CHARLOTTE FL 33948	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR SOUDER, JOHN S 6978 PAN AMERICAN BLVD NORTH PORT, FL 34287	☒ Delete	TR SOUDER JOHN S 6978 PAN AMERICAN BLVD NORTH PORT FL 34287	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR DALY, FRANCIS H 111 CARLISE AVE NW PORT CHARLOTTE, FL 33952	☒ Delete	TR YENO ALFRED F 2402 COMO ST. PORT CHARLOTTE FL 33948	☒ Change ☐ Addition

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: Paul J. LeBlanc Pres 4-11-7
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #

ATTACHMENT
G60019349

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 16, 2007

FLOTILLA 92 NORTH PORT, INC.
FLOTILLA 92, INC
P.O. BOX 7204
NORTH PORT, FL 34287

Subject: **FLOTILLA 92 NORTH PORT, INC.**

Reference Number: **722735**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling $61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

List the complete title, name, street address, city, state and zip code of each officer/director of the corporation.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/SG
ANNUAL REPORTS SECTION

THIS IS THE CHANGES TO OFFICES IN FLOTILLA 92 NORTH PORT INC

THANK YOU
Mr. James Hamilton

P.O. BOX 6327 - Tallahassee, Florida 32314