

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740752

1. Entity Name

THE ST. PETERSBURG SAIL AND POWER SQUADRON, INC.

FILED
Apr 05, 2000 8:00 am
Secretary of State

04-05-2000 90113 014 ****61.25

Principal Place of Business	Mailing Address
440 13TH AVE NORTH A ST. PETERSBURG FL 33701 US	440 13TH AVE NORTH A ST. PETERSBURG FL 33701-1126 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	Applied For
59-6149158	Not Applicable

5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PEARSON, FREDERICK 8600 15TH STREET, N. ST PETERSBURG FL 33702	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 _____ (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	AD- ☐ Delete	TITLE	Cdr. ☒ Change ☐ Addition
NAME	EIBACH, WILLIAM	NAME	
STREET ADDRESS	6807A 16TH STREET NE	STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33702	CITY-ST-ZIP	
TITLE	ED ☒ Delete	TITLE	Adm ☐ Change ☒ Addition
NAME	BECKMAN, KENNETH	NAME	Gerald LeClaire
STREET ADDRESS	4569 40TH ST. S.	STREET ADDRESS	9105 7th St. No
CITY-ST-ZIP	ST. PETERSBURG FL 33711	CITY-ST-ZIP	ST. Petersburg FL 33702-3005
TITLE	PD- ☐ Delete	TITLE	EX ☒ Change ☐ Addition
NAME	KRUPA, THOMAS	NAME	
STREET ADDRESS	8950 PARK BLVD., #305	STREET ADDRESS	
CITY-ST-ZIP	SEMINOLE FL 33777-4122	CITY-ST-ZIP	
TITLE	TD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	WISSING, JOYCE	NAME	
STREET ADDRESS	440 13TH AVE NORTH	STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33701	CITY-ST-ZIP	
TITLE	EDD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HOUGET, ROLAND	NAME	
STREET ADDRESS	835 SAN CARLOS AVE NORTHEAST	STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33702	CITY-ST-ZIP	
TITLE	SD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ARNOLD, HARRIET	NAME	
STREET ADDRESS	1120 NORTH SHORE DRIVE, NE 11-903	STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL 33701-1425	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: Joyce A. Wissing 4/3/00 (727) 821-7333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)