
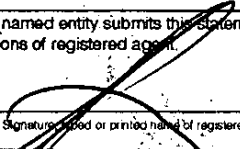
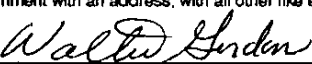


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90106 019 \*\*\*\*61.25

<b>DOCUMENT # N98000007389</b> 1. Entity Name HARRIS CHAIN SAIL AND POWER SQUADRON, INC.						
Principal Place of Business 407 DELMAR DRIVE THE VILLAGES, FL 32159			Mailing Address P.O. BOX 493304 LEESBURG, FL 34748 US			
2. Principal Place of Business - No P.O. Box # <u>12307 WEDGEFIELD DR.</u>		3. Mailing Address <u>SAME AS ABOVE</u>				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State <u>GRAND ISLAND, FL</u>		City & State		4. FEI Number <u>59-3549272</u>		
Zip <u>32735</u>		Country <u>LAKE</u>		Applied For Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent  RZEWSKI, JOSEPH 407 DELMAR DRIVE THE VILLAGES, FL 32159			7. Name and Address of New Registered Agent  Name <u>KERRY KLINE, KERRY</u> Street Address (P.O. Box Number is Not Acceptable) <u>12307 WEDGEFIELD DR.</u>  City <u>GRAND ISLAND</u> <u>FL</u> Zip Code <u>32735</u>			
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 		<u>KERRY STEVEN KLINE</u>		<u>4/16/08</u>		
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D RZEWSKI, JOSEPH 407 DELMAR DRIVE THE VILLAGES, FL 32159		<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <u>KLINE, KERRY</u> <u>12307 WEDGEFIELD DR.</u> <u>GRAND ISLAND, FL 32735</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLINE, KERRY 12307 WEDGEFIELD DR GRAND ISLAND, FL 32735		<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <u>HOWELL, FRANK</u> <u>13750 W. COLONIAL DR. STE 350 PM</u> <u>WINTER GARDEN, FL 34787</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WEDGE, JEANETTE 1644 LOVES POINT DRIVE LEESBURG, FL 34748		<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST <u>GORDON, WALTER</u> <u>9909 SANTA BARBARA CT.</u> <u>HOWEY-IN-THE-HILLS, FL 34737</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAD SPENCER, LISA 1609 MEADOW LN NE WINTER HAVEN, FL 33881		<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAO <u>HENKE, CATHERINE</u> <u>22217 SCENIC RIDGE CT.</u> <u>MOUNT DORA, FL 32757</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HEPTING, DAVID 929 ROYAL OAK BLVD LEESBURG, FL 34748		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEDO WEDGE, MICHAEL 1644 LOVES POINT DRIVE LEESBURG, FL 34748		<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEDO <u>SIMON, MARIA</u> <u>2002 OAKBEND DR.</u> <u>EUSTIS, FL 32726</u>	
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: 			<u>WALTER GORDON</u>		<u>4/15/08</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone # <u>352-408-7150</u>	