2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2002 8:00 AM
Secretary of State

DOCUMENT# 700393

Entity Name: JACKSONVILLE SAIL AND POWER SQUADRON, INC.

Current Principal Place of Business:

8028 CONCORD BLVD., W.
JACKSONVILLE, FL 32208

New Principal Place of Business:

2358 FOXHAVEN DRIVE
JACKSONVILLE, FL 32224

Current Mailing Address:

8028 CONCORD BLVD., W.
JACKSONVILLE, FL 32208

New Mailing Address:

2358 FOXHAVEN DRIVE
JACKSONVILLE, FL 32224

FEI Number: 59-6138222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEVESQUE, DAVID B
8028 CONCORD BLVD., W.
JACKSONVILLE, FL 32208

Name and Address of New Registered Agent:

ATKINSON, WILLIAM F
2358 FOXHAVEN DRIVE
JACKSONVILLE, FL 32224

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: WILLIAM F ATKINSON 01/16/2002
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: RAY, CALVIN C
Address: 4345 ORTEGA FARMS CIR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: VD ( ) Delete
Name: SMALL, ROBERT B
Address: 1005 FLORA PARKE DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D ( ) Delete
Name: ADAMS, MARK
Address: 3236 HIDDEN LAKE DR., E.
City-St-Zip: JACKSONVILLE, FL 32216

Title: SD ( ) Delete
Name: SHAPIRO, KAY
Address: 4345 ORTEGA FARMS CIR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: TD ( ) Delete
Name: LEVESQUE, DAVID B
Address: 8028 CONCORD BLVD., W.
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: ATKINSON, WILLIAM M
Address: 2358 FOXHAVEN DRIVE W.
City-St-Zip: JACKSONVILLE, FL 32224

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM M ATKINSON TREA 01/16/2002
Electronic Signature of Signing Officer or Director — Date