2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700393

FILED Feb 02, 2008 Secretary of State

Entity Name: JACKSONVILLE SAIL AND POWER SQUADRON, INC.

Current Principal Place of Business: New Principal Place of Business:

4345 ORTEGA FARMS CIRCLE 1210 HIDEAWAY DR. N. JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32259

Current Mailing Address: New Mailing Address:

4345 ORTEGA FARMS CIRCLE 1210 HIDEAWAY D. N. JACKSONVILLE, FL 32210 JACKSONVILLE, FL 32259

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAY, ANITA

4345 ORTEGA FARMS CIRCLE

JACKSONVILLE, FL 32210 US

TOMMASULO, JOHN C

1210 HIDEAWAY DR, N.

JACKSONVILLE, FL 32259 US

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: JOHN C. TOMMASULO 02/02/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD () Delete Title: PD (X) Change () Addition

 Name:
 PROPHET, JUDITH L
 Name:
 HUGUS, JOHN E III

 Address:
 4324 ORTEGA FARDMS CIRCLE
 Address:
 7710 GREENWICH CT.W.

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:
 JACKSONVILLE, FL 32277

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 RAY, CALVIN C
 Name:
 CAHILL, ABRAHAM B

 Address:
 4345 ORTEGA FARMS CIRCLE
 Address:
 5116 MCMANUS DR.

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: S () Delete Title: S (X) Change () Addition

 Name:
 DAMON, DAVID R
 Name:
 LOYACANO, BECKY H

 Address:
 7930 BELLEMEADE BLVD. 5
 Address:
 6033 WEST SHORES RD.

 City-St-Zip:
 JACKSONVILLE, FL 32211
 City-St-Zip:
 ORANGE PARK, FL 32003

Name:RAY, ANITAName:TOMMASULO, JOHN CAddress:4345 ORTEGA FARMS CIRCLEAddress:1210 HIDEAWAY DR. N.City-St-Zip:JACKSONVILLE, FL 32210City-St-Zip:JACKSONVILLE, FL 32259

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOHN C. TOMMASULO TD 02/02/2008