## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 18, 2005 8:00 am Secretary of State

DOCUMENT # 700582  1. Entity Name ORLANDO POWER SQUADRON INC								04-18-20	tai y 05 90301			
3740 WILDER LANE 374			3740	Mailing Address 3740 WILDER LANE ORLANDO, FL 32733 US				941H 94141 BH21 (BH21	18 (181 B181) B1811			
Principal Place of Business     3.			3. Maili	3. Mailing Address								
Suite. Apt. #, etc.			Sui	Suite, Apt. #, etc.				03172005	Chg-NP	CR2EC	37 (10/03)	
City & State			City	City & State				4. FEI Numb 59-620			<b>⊢</b>	oplied For of Applicable
Zip Country		Zip	. — Др. — С		untry				\$8.75 Add Fee Require			
	6. Name	and Address of Current	Registere	d Agent				7. Name and	Address of Ne	w Registered	Agent	
GRANT, EUGENE						Name				-		-
3740 WILDER LANE ORLANDO, FL 32733						Street Address (P.O. Box Number is Not Acceptable)						
						City				FI	Zip Coo	le
8. The above	named entit	y submits this statement for	or the purpo	se of changing its	registere	ed office or	register	ed agent, or bo	th, in the State of		familiar with,	and accept
ine obligat	dons of regis	icieo ageni.										
SIGNATURE												
SIGNATORE .	Signature, typed	or printed name of registered agent	t and title if appl	cable, (NOT	E: Registere	kd Agent signativ	ne required	when reinstating)		DATE		
	Filing Fe	or printed name of registered agent re is \$61.25 flay 1, 2005	t and title if appr	9. Election Car Trust Fund (	mpaign F	inancing	ure required	\$5.00 May E Added to Fees	le (		k payable t	
10.	Filing Fe Due by N	e is \$61.25		9. Election Car Trust Fund (	mpaign F Contribut	Financing ion.		\$5.00 May E Added to Fees	e I	Make chec Florida Depa	RECTORS IN	tate
	S YOCUM,	e is \$61.25 flay 1, 2005	RECTORS	9. Election Car	mpaign F Contributi 11. TITLI NAM STRE	Financing ion.  E E E E E T ADDRESS		\$5.00 May E Added to Fees DDITIONS/CH	ANGES TO OFF	Make chec Florida Depa FICERS AND D	IRECTORS IN	tate
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12. Thereby 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 is 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:

EUGGENE SIGNATURE AND/TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

12 APRI 2005 Date Daylore Phone \$