

FILE NOW: FILING FEE IS \$61.25

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Apr 17 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **708701** (8)  
1. Corporation Name  
**TALLAHASSEE SAIL AND POWER SQUADRON, INC.**

Principal Place of Business <b>2032 WILDRIDGE DR TALLAHASSEE FL 32303 US</b>	Mailing Address <b>2032 WILDRIDGE DR TALLAHASSEE FL 32303 US</b>
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2. Principal Place of Business <b>21 2005 DYREHAVEN DR.</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23 TALLAHASSEE, FL</b> Zip <b>24 32311</b> Country <b>25 USA</b>	2a. Mailing Address <b>26 2005 DYREHAVEN DR.</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28 TALLAHASSEE, FL</b> Zip <b>29 32311</b> Country <b>30 USA</b>
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3. Date Incorporated or Qualified <b>03/25/1965</b>	4. FEI Number <b>59-6149383</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent <b>BELTON, CALVIN 1125 CARRIN DRIVE TALLAHASSEE FL 32301</b>	10. Name and Address of New Registered Agent <b>81 Name</b> <b>82 Street Address (P.O. Box Number is Not Acceptable)</b> <b>83</b> <b>84 City</b> <b>FL</b> <b>85 Zip Code</b>
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	NAME <b>DAWS, S G</b>	1.1 TITLE <b>D</b>	1.2 NAME <b>DESILETS, JOHN</b>
STREET ADDRESS <b>RT. 14 BOX 347X</b>	CITY-ST-ZIP <b>TALLAHASSEE FL</b>	1.3 STREET ADDRESS <b>4309 KIMMER ROWE DR.</b>	1.4 CITY-ST-ZIP <b>TALLAHASSEE, FL 32308</b>
TITLE <b>D</b>	NAME <b>FORD, JAMES SR</b>	2.1 TITLE	2.2 NAME
STREET ADDRESS <b>2029 N MERIDIAN RD</b>	CITY-ST-ZIP <b>TALLAHASSEE FL</b>	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE <b>DT</b>	NAME <b>HARRELL, JP</b>	3.1 TITLE	3.2 NAME
STREET ADDRESS <b>5135 GUM RD</b>	CITY-ST-ZIP <b>TALLAHASSEE FL</b>	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE <b>P</b>	NAME <b>TTERLIKKIS, DONNA</b>	4.1 TITLE <b>D</b>	4.2 NAME
STREET ADDRESS <b>2032 WILDRIDGE DR</b>	CITY-ST-ZIP <b>TALLAHASSEE FL</b>	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE <b>D</b>	NAME <b>BELTON, CALVIN W.</b>	5.1 TITLE	5.2 NAME
STREET ADDRESS <b>1125 CARRIN DRIVE</b>	CITY-ST-ZIP <b>TALLAHASSEE FL</b>	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE <b>D</b>	NAME <b>REEDER, NANCY</b>	6.1 TITLE <b>P</b>	6.2 NAME
STREET ADDRESS <b>2005 DYREHAVEN DR</b>	CITY-ST-ZIP <b>TALLAHASSEE FL</b>	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Nancy M. Reeder Date: 3/4/98 Phone: 487-9294

CR2E037 (10/97)