

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708908

FILED  
Apr 28, 2005  
Secretary of State

**Entity Name:** CUTLER COVE POWERS SQUADRON, INC.

**Current Principal Place of Business:**

8601 S W 146 ST  
MIAMI, FL 33158 US

**New Principal Place of Business:**

**Current Mailing Address:**

8601 S W 146 ST  
MIAMI, FL 33158 US

**New Mailing Address:**

**FEI Number:** 59-6170590

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BONNOUGH, BRUCE  
8601 SW 146 ST  
MIAMI, FL 33158 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: BONNOUGH, BRUCE  
Address: 8601 SW 146 ST  
City-St-Zip: MIAMI, FL 33158

Title: PD ( ) Delete  
Name: BUKSCH, ROBERT  
Address: 8241 SW 185 ST  
City-St-Zip: MIAMI, FL 33157

Title: SD ( ) Delete  
Name: SIMS, LINDA  
Address: 7440 S W 96 CT  
City-St-Zip: MIAMI, FL 33173

Title: MD ( ) Delete  
Name: ROOT, CLIFF  
Address: 11611 S W 104 CRT  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: SD (X) Change ( ) Addition  
Name: STEWART, RAY  
Address: 19720 BEL AIRE DR  
City-St-Zip: MIAMI, FL 33157

Title: PD (X) Change ( ) Addition  
Name: SIMS, LINDA  
Address: 7440 S W 96 CT  
City-St-Zip: MIAMI, FL 33173

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

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: BRUCE BONNOUGH

TD

04/28/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date