

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 708979 (0)

1. Corporation Name

CAPE CORAL POWER SQUADRON, INC.



Principal Place of Business

Mailing Address

917 S E 47TH TERRACE
CAPE CORAL FL 33904

917 S E 47TH TERRACE
CAPE CORAL FL 33904

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/19/1965

3a. Date of Last Report

02/08/1995

4. FEI Number

59-6166198

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

BOOK, ERIC G.

82 Street Address (P.O. Box Number is Not Acceptable)

4200 SE 19TH AVE, #14

83

84 City

CAPE CORAL

FL

85 Zip Code

33904

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

ERIC G. BOOK TREASURER

15 FEB 96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when substituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE

NAME TRAUTAMANN, PEGGY F
STREET ADDRESS 2024 PALACO GRAND PKWY
CITY-ST-ZIP CAPE CORAL FL

TITLE TD ☐ DELETE

NAME GARMON, RUSSELL
STREET ADDRESS 2744 SW 28TH PLACE
CITY-ST-ZIP CAPE CORAL FL

TITLE SD ☐ DELETE

NAME AWIS, VERONICA M.
STREET ADDRESS 4210 SE 19TH AVE 2H
CITY-ST-ZIP CAPE CORAL FL

TITLE E ☐ DELETE

NAME BRASFIELD, ROBERT T
STREET ADDRESS 4407 SE 19TH PLACE
CITY-ST-ZIP CAPE CORAL FL

TITLE AO ☐ DELETE

NAME KEIL, JAMES F
STREET ADDRESS 2300 SW 39TH TERRACE
CITY-ST-ZIP CAPE CORAL FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE COMMANDER ☒ Change ☐ Addition

1.2 NAME BRASFIELD, ROBERT T.
1.3 STREET ADDRESS 4407 SE 19TH PLACE
1.4 CITY-ST-ZIP CAPE CORAL FL 33904

2.1 TITLE TREASURER ☒ Change ☐ Addition

2.2 NAME BOOK, ERIC G
2.3 STREET ADDRESS 4210 SE 19TH AVE, #14
2.4 CITY-ST-ZIP CAPE CORAL FL 33904

3.1 TITLE EXECUTIVE OFFICER ☒ Change ☐ Addition

3.2 NAME KEIL, JAMES F
3.3 STREET ADDRESS 2300 SW 39TH TERRACE
3.4 CITY-ST-ZIP CAPE CORAL FL 33904

4.1 TITLE SECRETARY ☒ Change ☐ Addition

4.2 NAME DENT, JOHN R
4.3 STREET ADDRESS 2517 SE 19TH PLACE
4.4 CITY-ST-ZIP CAPE CORAL FL 33904

5.1 TITLE ADMINISTRATIVE OFFICER ☒ Change ☐ Addition

5.2 NAME KENNEDY, GEORGE F
5.3 STREET ADDRESS 841 MANTICELLO CT
5.4 CITY-ST-ZIP CAPE CORAL FL 33904

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

ERIC G. BOOK 15 FEB 96 592-1110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone

CR2E037 (12/95)