2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 02, 2005 8:00 am
Secretary of State
05-06-2005 90107 045 ****61.25

DOCUMENT # 708979

1. Entity 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

1st MOORE CR2E037 (10/04)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-6166198 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
POWELL, HAZEL 917 SE 47TH TERRACE CAPE CORAL FL 33904	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Hazel Powell 5/31/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AOD SOLTYSIAK, LEE 917 SE 47TH TERRACE CAPE CORAL FL 33904	☐ Delete	OD SOLTYSIAK, LEE	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD WOODWARD, MICHAEL 917 SE 47TH TERRACE CAPE CORAL FL 33904	☒ Delete	SD ALICE CLARQUE 917 SE 47TH TERRACE CAPE CORAL FL 33904	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD POWELL, HAZEL 917 SE 47TH TERRACE CAPE CORAL FL 33904	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OD SOLTYSIAK, SUZANNE 917 SE 47TH TERRACE CAPE CORAL FL 33904	☐ Delete	CD SOLTYSIAK, SUZANNE	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CLAROQUE, PAUL 917 SE 47TH TERRACE CAPE CORAL FL 33904	☐ Delete	AOD CLAROQUE, PAUL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EOD HAMMOND, MARY 917 SE 47TH TERRACE CAPE CORAL FL 33904	☐ Delete		☐ Change ☐ Addition

12. 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 report or 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: Hazel L Powell 5/31/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #