

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90064 027 ****61.25

DOCUMENT # 711592

1. Entity Name
OCALA POWER SQUADRON, INC.



Principal Place of Business
P. O. BOX 2113
OCALA, FL 34478-2113 US

Mailing Address
P. O. BOX 2113
OCALA, FL 34478-2113 US

50014674



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01112005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1832265

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

FIELDS, WALTER C
3355 N.W. 88TH AVE
OCALA, FL 34482

7. Name and Address of New Registered Agent

Name Kathleen Kern
Street Address (P.O. Box Number is Not Acceptable)
8483 SW 61 Ter. R2
Ocala FL 34476
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 Kathleen Kern

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/26/05

**Filing 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

TITLE CDR
NAME GREENHALGH, JAMES ☒ Delete
STREET ADDRESS 3017 S.W. 34TH TERRACE
CITY-ST-ZIP Ocala, FL 34474

TITLE EXEC CDR
NAME MCGHEE, BARBARA ☐ Delete
STREET ADDRESS 6969 SE 14TH COURT
CITY-ST-ZIP Ocala, FL 34480

TITLE SEO
NAME TRENT, LINDA ☐ Delete
STREET ADDRESS 12162 SE 60TH AVE RD
CITY-ST-ZIP BELLEVUE, FL 34420

TITLE AD/O Exec
NAME LEGG, SR., DAVID D ☒ Delete
STREET ADDRESS 12162 SE 60TH AVE RD
CITY-ST-ZIP BELLEVUE, FL 34420

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CDR
NAME MCGHEE, BARBARA ☒ Change ☐ Addition
STREET ADDRESS 6969 SE 14TH COURT
CITY-ST-ZIP Ocala FL 34480

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS ← Same
CITY-ST-ZIP

TITLE Exec
NAME Legg, Sr. David D ☒ Change ☐ Addition
STREET ADDRESS ← 12162 SE 60 Ave Rd
CITY-ST-ZIP Bellevue, FL 34420

TITLE AD/O
NAME Katie Melanson ☐ Change ☒ Addition
STREET ADDRESS 6400-D Lakewood Dr.
CITY-ST-ZIP Ocala FL 34472-8495

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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: Kathleen Kern

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/05 352-854-9869
Date Daytime Phone #