

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 711592

FILED  
Apr 18, 2003  
Secretary of State

Entity Name: OCALA POWER SQUADRON, INC.

**Current Principal Place of Business:**

P. O. BOX 2113  
OCALA, FL 344782113 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 2113  
OCALA, FL 344782113 US

**New Mailing Address:**

FEI Number: 59-1832265      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CRUSSELL, LIZABETH  
1507 NE 17TH AVE  
OCALA, FL 34470

**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: CDR ( ) Delete  
Name: MCGEE, ROBERT  
Address: 6969 SE 14TH CT  
City-St-Zip: PALM BEACH, FL 334806685

Title: LTCD ( ) Delete  
Name: TRENT, LINDA  
Address: 11001 SE SUNSET HARBOR RD  
City-St-Zip: SUMMERFIELD, FL 344917669

Title: LTCD ( ) Delete  
Name: FIELDS, NORMA A  
Address: 4539 NE 6TH ST  
City-St-Zip: OCALA, FL 34470

Title: LTCD ( ) Delete  
Name: CRUSSELL, LIZABETH  
Address: 1507 NE 17TH AVE  
City-St-Zip: OCALA, FL 34470

Title: LTCD ( ) Delete  
Name: MCGHEE, ROBERT  
Address: 6969 SE 14TH CT  
City-St-Zip: OCALA, FL 344806685

Title: LTCD (X) Delete  
Name: CRUSSELL, LIZABETH L  
Address: 1507 NE 17TH AVE  
City-St-Zip: OCALA, FL 34482

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

Title: CDR (X) Change ( ) Addition  
Name: LINDA, TRENT CDR  
Address: 12162 SE 60TH AVE. RD  
City-St-Zip: BELLEVIEW, FL 34420 US

Title: EXEC (X) Change ( ) Addition  
Name: BOBERT, MCGHEE LT/C  
Address: 6969 SE 14TH CT  
City-St-Zip: OCALA, FL 34480 US

Title: E/O (X) Change ( ) Addition  
Name: BARBARA, MCGHEE LT/C  
Address: 6969 SE 14TH CT  
City-St-Zip: OCALA, FL 34480 US

Title: AD/O (X) Change ( ) Addition  
Name: GREENHALGH, JAMES P/C  
Address: 3017 SW 34TH TERRACE  
City-St-Zip: OCALA, FL 34474 US

Title: TREA (X) Change ( ) Addition  
Name: FRANK, STAPLEFORD LT/C  
Address: 9527 SE 165TH LANE  
City-St-Zip: SUMMERFIELD, FL 34491 US

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: FRANK STAPLEFORD

TRES

04/18/2003

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

\_\_\_\_\_  
Date