2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Mar 08, 2006 8:00 am

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CORAL RIDGE SAIL AND POWER SQUADRON, INC.					Secretary of State 03-08-2006 90191 047 ****61.25				
Principal Place		Mailing Address							
1000 D/ 11 1 12	W DRIVE #801 UC	4800 BAYVIEW BRIVE #8					1	E 0 0 0 1	E 710
FORT LAUDES	RDALE, FL 33308 US	FORT LAUDERDALE, FL 3	13308 US	-			•	50001	016
2. Principal Pl	lace of Business VE 37th Street	3. Mailing Address 25/1 NE 37/	h. Street	1					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			02242006 C	hg-NP	CR2E03	37 (11/05)	
City & State	Lauderdale, FL	Fort Loader	lale, FL	. 4	59-62102	49		· · ·	plied For t Applicable
Zip 333		33308	Country Arechard	1 -	5. Certificate of S	Status Desired		\$8.75 Add Fee Required	
····	6. Name and Address of Current			7	7. Name and Ad	dress of New	Registered /	Agent	
BAGAN, PATRICIA R				Name Robert E. Schwarm					
	VIEW DRIVE #801		Street Ac	Street Address (P.O. Box Number is Not Acceptable)					
FURILAU	IDERDALE, FL 33308			25/7	N.E. 3	714.5	treet		
					 			Zip Code	
			City Z	a,7 /.				1 20 000	<u>~</u> 0
	named entity submits this statement for	the purpose of changing its re		registered	agent, or both, in	n the State of F	FL florida, I am	- 1.333	<i>D</i> 8
8. The above the obligati	named entity submits this statement for lons of registered agent.			registered	A Ud L r da - agent, or both, in	n the State of F		- 1.333	<i>D</i> 8
8. The above the obligati		rm, Treus.		registered	agent, or both, in	n the State of F		- 1.333	<i>D</i> 8
8. The above the obligation of	Robert E. Schwiff Signature, typed or printed name of registered agent of Filling Fee Is \$61.25 Due by May 1, 2006	end title if applicable. (NOTE R 9. Election Campu Trust Fund Cor	gistered office or Leb E Legistered Agent eignetur aign Financing ntribution.	registered regused whe	agent, or both, in which the control of the control	the State of F	2/2/2/ DATE Make checlorida Depar	familiar with, 9/06 k payable to the thread of St	and accept
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.