FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 714016

FORT WALTON SAIL AND POWER SQUADRON OF UNITED ST ATES POWER SQUADRON, INC.

Principal Place of Business

Mailing Address

179 GREENACRES ROAD P. O. BOX 1461

P.O. BOX 1461

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

FORT WALTON, BEACH FL 32549

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

FT. WALTON BCH. FL 32549

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90039 008 ****61.25

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

01/26/1968

71-4016560

4. FEI Number

23		[20]										
Zip	Country	Zip	Cour	ntry		6. Election Campaign Financing	\$5.00	· ·				
24	25	29	30			Trust Fund Contribution	Added to	Fees				
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent								
				81	Name							
PURCELL,	CHARLES K.		82	2 Street Address (P.O. Box Number is Not Acceptable)								
1292 BAYSHORE DRIVE												
VALPARAISO FL 32580					83							
					City	*						
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	Signature, typed or printed name of registered agent of	and title if applicable. (NOT	E: Registered	Agent	signature required	when reinstating) DATE						
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND						
TITLE	Р	DELETE	1.1 TIT	LE	Ρ		Change	Addition				
NAME	•		1.2 NA	ME		WILLIAM R. DODSON 35 THIRD AVE.						
STREET ADDRESS	ATTO OPERANT COVE			REET		FLIMAR FL 32579						
CITY-ST-ZIP	NICEVILLE FL 32578		1.4 CIT		-ZIP	2114777	(Carbanaa	Addition				
TITLE	V	DELETE	2.1 TIT	LE	Y.		Change	☐ Addition				
NAME	DODSON, WILLIAM R		2.2 NA			GLI, WILBURG						
STREET ADDRESS	35 THIRD AVE.		2.3 STI	REET.		NW BAYOU WOODS CT		-				
CITY-ST-ZIP	SHALIMAR FL 32579		2.4 CF		·ZIF	WALTON BCH. FL 32549	Change	Addition				
TITLE	π _	DELETE	3.1 TIT		TO	TTO, GARL M	Change	. Pa Addition				
NAME	KNELLER, M. S		3.2 NA		. 1136	CAU LA RUE						
STREET ADDRESS	208 CALHOUN AVE.		3.3 ST	REET	ADDRESS 27	WALTON BCH. FL32547						
CITY-ST-ZIP	DESTIN FL		3.4. CI		- ZIP	WAR TON TO		(F) Letter 1914 a. a.				
TITLE	SD	☐ DELETE	4.1 TIT	Œ	SD		Change	Addition				
NAME	DEVITT, JOHN C		4. 2 NA		inc a	RCAK, KAREN						
STREET ADDRESS.	844 OVERBROOK DR.		4.3 STI	REET		BEAL PARKWAY						
CITY-ST-ZIP	FT. WALTON BCH. FL 32547		4.4 CIT	Y-ST	-ZIP	WALTON SCH. FL 32548		Parties 1945				
TITLE	D	☑ DELETE	5.1 117		D	STON, ALLEN H	Change	[F] Addition				
NAME	HENKLE, EDWARD B.		5.2 NA		701	OVER BROOK DRIVE						
STREET ADDRESS	1457 OAKMONT PLACE					WALTON BCH. FL 32547	•					
CITY-ST-ZIP	NICEVILLE FL		5.4 CIT									
TITLE	D	☐ DELETE	6.1 TIT	LΕ	D		Change	☐ Addition				
NAME	HUGLI, WILBUR G		6.2 NA	ME	PE	VITT, JOHN C		į				
STREET ADDRESS	12 NW BAYOU WOODS CT.		6.3 STI	REET	ADDRESS 84	4 OVERBROOK DRIVE						
CITY-ST-ZIP	FT. WALTON BCH. FL 32549		6.4 CIT	ry-st	-ZIP FT.	WALTON BCH. FL 32547						

14. 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 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, with all other like empowered.

SIGNATURE: CASCIMAGETTO ECARQUERATOTTO