2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State
03-26-2003 90192 033 ****61.25

DOCUMENT # 714016

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

Principal Place of Business	Mailing Address
404 GREENACRES ROAD FORT WALTON BEACH FL 32548	P.O. BOX 1461 FT. WALTON BCH. FL 32549

☑ CHECK HERE IF MAKING CHANGES

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 71-4016560 ☐ 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
HUTTO, CARL M 129 GAIL LA RUE FORT WALTON BEACH FL 32547	Name KAREN DANIELS Street Address (P.O. Box Number is Not Acceptable) 1872 BISCAYNE CIR DR City NAVARRE FL Zip Code 32566

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 Karen L Daniels 3/25/03
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

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	P GERCAK, KAREN 91A BEAL PKWY FT. WALTON BEACH FL 32548	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EXECUTIVE OFFICER (VP)/D) GERALD J. COTE 302 SOMERSET DR Ft. WALTON BEACH, FL 32547	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DEVITT, JOHN C 844 OVERBROOK DR FORT WALTON BEACH FL 32547	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ADMINISTRATIVE OFFICER (D) RICHARD GERCAK 91 A BEAL PARKWAY FT WALTON BEACH, FL 32548	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HUTTO, CARL M 129 GAIL LA RUE FT WALTON BEACH FL 32547	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER (T/D) KAREN DANIELS 1872 BISCAYNE CIR DR NAVARRE, FL 32566	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD STRINGER, CHARITY N 409 WOODROW ST FORT WALTON BEACH FL 32547	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY (S/D) FRED HEWITT 946 Choctaw hatchee Rd NICEVILLE, FL 32578	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VACHON, DAVID P 105 HARRIS RD. N.E. FT. WALTON BEACH FL 32547	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KNELLER, SUSAN M 208 CALHOUN AV DESTIN FL 32541	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President (P)	☒ Change ☐ Addition

CR2E037 (10/02)

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: Karen L Daniels DIRECTOR KAREN L. DANIELS 3/25/03 (850) 609-3413