

FILE NOW: FILING FEE AFTER MAY-1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR -7 AM 11:18

DOCUMENT # 722044

(5)

1. Corporation Name

NAPLES POWER SQUADRON, INC.

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

Mailing Address

**297 AIRPORT RD N
NAPLES FL 33942**

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NAPLES FL 33942**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1971

3a. Date of Last Report

02/10/1994

4. FEI Number

59-6209881

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GOSSETTE, ALBERT B
297 AIRPORT RD. NORTH
NAPLES FL 33942**

81. Name

Alexander MacNicol

82. Street Address (P.O. Box Number is Not Acceptable)

1275 Wahoo Ct.

83.

Naples Fl. 33962

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

ALEXANDER MACNICOL

(Signature, typed or printed name of registered agent and the filer)

(NOTE: Registered Agent signature required when registering)

DATE

3/9/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VD
NAME	ERNEST G. SANDERS
STREET ADDRESS	5102 HARROGATE COURT
CITY - ST - ZIP	NAPLES FL
TITLE	VD
NAME	BRADY, ROBERT L
STREET ADDRESS	2234 GULF SHORE BLVD. N
CITY - ST - ZIP	NAPLES FL
TITLE	PD
NAME	SCARLETT, EDNA
STREET ADDRESS	529 LANDMARK DR.
CITY - ST - ZIP	NAPLES FL
TITLE	VD
NAME	YEATON, MINOT
STREET ADDRESS	1222 COBIA CT
CITY - ST - ZIP	NAPLES FL
TITLE	S
NAME	MCKINNEY, WILLIAM E
STREET ADDRESS	1898 MISSION DR
CITY - ST - ZIP	NAPLES FL
TITLE	VD
NAME	GOSSETTE, ALBERT B
STREET ADDRESS	3805 ARCTIC CIR
CITY - ST - ZIP	NAPLES FL

1.1 TITLE	VD	☒ Change ☐ Addition
1.2 NAME	Ernest G. Sanders	
1.3 STREET ADDRESS	257 Deerwood Circle Unit #1	
1.4 CITY - ST - ZIP	Naples Fl.	
2.1 TITLE	PD	☒ Change ☐ Addition
2.2 NAME	Robert L. Brady	
2.3 STREET ADDRESS	2234 Gulf Shore Blvd. N	
2.4 CITY - ST - ZIP	Naples Fl.	
3.1 TITLE	VD	☒ Change ☐ Addition
3.2 NAME	Minot Yeaton	
3.3 STREET ADDRESS	1222 Cobia Ct.	
3.4 CITY - ST - ZIP	Naples Fl.	
4.1 TITLE	VD	☒ Change ☐ Addition
4.2 NAME	John Casey	
4.3 STREET ADDRESS	7360 St. Ives Way #2204	
4.4 CITY - ST - ZIP	Naples Fl.	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	VTD	☒ Change ☐ Addition
6.2 NAME	Alexander MacNicol	
6.3 STREET ADDRESS	1275 Wahoo Ct.	
6.4 CITY - ST - ZIP	Naples Fl.	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Alexander MacNicol

(Signature and typed or printed name of signing officer or director)

2/16/95

Date

(813) 775-7312

Telephone Number