

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 722044

1. Entity Name

NAPLES POWER SQUADRON, INC.

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90269 030 ****61.25

Principal Place of Business

297 AIRPORT RD N
NAPLES FL 33942

Mailing Address

297 AIRPORT RD N
NAPLES FL 34104-3505

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-6209881

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KILLEU, MARIANNE
6950 HUNTERS RD
NAPLES FL 34409

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME VD
STREET ADDRESS SANDERS, ERNEST G.
CITY-ST-ZIP 257 DEERWOOD CIRCLE UNIT #1
NAPLES FL

TITLE ☒ Delete
NAME VD
STREET ADDRESS REID, WILLIAM
CITY-ST-ZIP 4001 GULF SHORE BLVD N. #902
NAPLES FL

TITLE ☐ Delete
NAME VD
STREET ADDRESS LANE, JANET
CITY-ST-ZIP 1560 DOLPHIN LANE
NAPLES FL 34102

TITLE ☐ Delete
NAME VD
STREET ADDRESS WARD, ARCHIE
CITY-ST-ZIP 199 LADY PALM DRIVE
NAPLES FL

TITLE ☐ Delete
NAME S
STREET ADDRESS LLOMPART, JOSE
CITY-ST-ZIP 1983 E. CROWN PT. BLVD.
NAPLES FL

TITLE ☐ Delete
NAME VTD
STREET ADDRESS KILLEN, MARIANNE
CITY-ST-ZIP 69650 HUNTERS RD
NAPLES FL 34109

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME TD D
STREET ADDRESS J. DAVID KEUGH
CITY-ST-ZIP 663 7TH ST N
NAPLES FL 34102

TITLE ☐ Change ☒ Addition
NAME EDWARD IRVING
STREET ADDRESS 27760 RIVERWALK WAY
CITY-ST-ZIP BONITA SPRINGS 34134

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME PD
STREET ADDRESS WARD ARCHIE
CITY-ST-ZIP 199 LADY PALM DRIVE
NAPLES FL

TITLE ☒ Change ☐ Addition
NAME SD
STREET ADDRESS LLOMPART, JOSE
CITY-ST-ZIP 1983 E CROWN PT. BLVD
NAPLES FL

TITLE ☒ Change ☐ Addition
NAME SD
STREET ADDRESS KILLEN, MARIANNE
CITY-ST-ZIP 69650 HUNTERS RD
NAPLES FL 34109

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. 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/00

Date

941
643-5910

Daytime Phone #