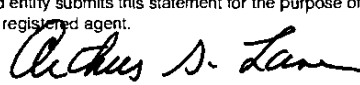
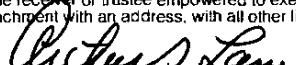


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90025 039 ****61.25

DOCUMENT # 722044 1. Entity Name NAPLES SAIL AND POWER SQUADRON, INC.																																																																																																																																																					
Principal Place of Business 297 AIRPORT RD N NAPLES, FL 33942			Mailing Address 297 AIRPORT RD N NAPLES, FL 33942																																																																																																																																																		
2. Principal Place of Business		3. Mailing Address																																																																																																																																																			
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																																			
City & State		City & State																																																																																																																																																			
Zip		Country		4. FEI Number 59-6209881																																																																																																																																																	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																																																	
6. Name and Address of Current Registered Agent LANE, ARTHUR S 1560 DOLPHIN LA NAPLES, FL 34102				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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE																																																																																																																																																					
Filing Fee is \$61.25 Due by May 1, 2004		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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">VD</td> <td style="width: 20%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>SANDERS, ERNEST G.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>257 DEERWOOD CIRCLE UNIT #1</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VD</td> <td style="text-align: right;">☒ Delete</td> </tr> <tr> <td>NAME</td> <td>LAWSON, JAMES</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>832 CARRICK BEND CIR.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34110</td> <td></td> </tr> <tr> <td>TITLE</td> <td>TD</td> <td style="text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>LANE, ARTHUR S</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1560 DOLPHIN LANE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34102</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VD</td> <td style="text-align: right;">☒ Delete</td> </tr> <tr> <td>NAME</td> <td>GILL, JOHN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3142 W. CROWN POINTE BLVD.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34112</td> <td></td> </tr> <tr> <td>TITLE</td> <td>SD</td> <td style="text-align: right;">☒ Delete</td> </tr> <tr> <td>NAME</td> <td>LLOMPART, JOSE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1983 E. CROWN PT, BLVD.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>PD</td> <td style="text-align: right;">☒ Delete</td> </tr> <tr> <td>NAME</td> <td>KILLEN, MARIANNE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>843 MARBLEHEAD DR.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34104</td> <td></td> </tr> </table> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">COMMANDER</td> <td style="width: 20%; text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>PETER THORKELOW</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1511 WHISPERING OAKS CIR.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34110</td> <td></td> </tr> <tr> <td>TITLE</td> <td>EXECUTIVE OFFICER</td> <td style="text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>JAMES McDONALD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>700 DIAMOND CIRCLE # 8</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34110</td> <td></td> </tr> <tr> <td>TITLE</td> <td>ADMINISTRATOR OFFICER</td> <td style="text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>JAMES LAWSON</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>832 CARRICK BEND DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34110</td> <td></td> </tr> <tr> <td>TITLE</td> <td>JOHN SECRETARY</td> <td style="text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>JOHN GILL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3142 W. CROWN POINT BLVD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34112</td> <td></td> </tr> <tr> <td>TITLE</td> <td>DIRECTOR</td> <td style="text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>MARNIE M'NEELY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>20712 COUNTY BARN RD.</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 33928</td> <td></td> </tr> <tr> <td>TITLE</td> <td>DIRECTOR</td> <td style="text-align: right;">☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>DOUGLAS WAGNER</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5342 GUADELOUPE WAY</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NAPLES, FL 34119</td> <td></td> </tr> </table>						TITLE	VD	☐ Delete	NAME	SANDERS, ERNEST G.		STREET ADDRESS	257 DEERWOOD CIRCLE UNIT #1		CITY-ST-ZIP	NAPLES, FL		TITLE	VD	☒ Delete	NAME	LAWSON, JAMES		STREET ADDRESS	832 CARRICK BEND CIR.		CITY-ST-ZIP	NAPLES, FL 34110		TITLE	TD	☐ Delete	NAME	LANE, ARTHUR S		STREET ADDRESS	1560 DOLPHIN LANE		CITY-ST-ZIP	NAPLES, FL 34102		TITLE	VD	☒ Delete	NAME	GILL, JOHN		STREET ADDRESS	3142 W. CROWN POINTE BLVD.		CITY-ST-ZIP	NAPLES, FL 34112		TITLE	SD	☒ Delete	NAME	LLOMPART, JOSE		STREET ADDRESS	1983 E. CROWN PT, BLVD.		CITY-ST-ZIP	NAPLES, FL		TITLE	PD	☒ Delete	NAME	KILLEN, MARIANNE		STREET ADDRESS	843 MARBLEHEAD DR.		CITY-ST-ZIP	NAPLES, FL 34104		TITLE	COMMANDER	☐ Change ☒ Addition	NAME	PETER THORKELOW		STREET ADDRESS	1511 WHISPERING OAKS CIR.		CITY-ST-ZIP	NAPLES, FL 34110		TITLE	EXECUTIVE OFFICER	☐ Change ☒ Addition	NAME	JAMES McDONALD		STREET ADDRESS	700 DIAMOND CIRCLE # 8		CITY-ST-ZIP	NAPLES, FL 34110		TITLE	ADMINISTRATOR OFFICER	☐ Change ☒ Addition	NAME	JAMES LAWSON		STREET ADDRESS	832 CARRICK BEND DR		CITY-ST-ZIP	NAPLES, FL 34110		TITLE	JOHN SECRETARY	☐ Change ☒ Addition	NAME	JOHN GILL		STREET ADDRESS	3142 W. CROWN POINT BLVD		CITY-ST-ZIP	NAPLES, FL 34112		TITLE	DIRECTOR	☐ Change ☒ Addition	NAME	MARNIE M'NEELY		STREET ADDRESS	20712 COUNTY BARN RD.		CITY-ST-ZIP	NAPLES, FL 33928		TITLE	DIRECTOR	☐ Change ☒ Addition	NAME	DOUGLAS WAGNER		STREET ADDRESS	5342 GUADELOUPE WAY		CITY-ST-ZIP	NAPLES, FL 34119	
TITLE	VD	☐ Delete																																																																																																																																																			
NAME	SANDERS, ERNEST G.																																																																																																																																																				
STREET ADDRESS	257 DEERWOOD CIRCLE UNIT #1																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL																																																																																																																																																				
TITLE	VD	☒ Delete																																																																																																																																																			
NAME	LAWSON, JAMES																																																																																																																																																				
STREET ADDRESS	832 CARRICK BEND CIR.																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34110																																																																																																																																																				
TITLE	TD	☐ Delete																																																																																																																																																			
NAME	LANE, ARTHUR S																																																																																																																																																				
STREET ADDRESS	1560 DOLPHIN LANE																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34102																																																																																																																																																				
TITLE	VD	☒ Delete																																																																																																																																																			
NAME	GILL, JOHN																																																																																																																																																				
STREET ADDRESS	3142 W. CROWN POINTE BLVD.																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34112																																																																																																																																																				
TITLE	SD	☒ Delete																																																																																																																																																			
NAME	LLOMPART, JOSE																																																																																																																																																				
STREET ADDRESS	1983 E. CROWN PT, BLVD.																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL																																																																																																																																																				
TITLE	PD	☒ Delete																																																																																																																																																			
NAME	KILLEN, MARIANNE																																																																																																																																																				
STREET ADDRESS	843 MARBLEHEAD DR.																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34104																																																																																																																																																				
TITLE	COMMANDER	☐ Change ☒ Addition																																																																																																																																																			
NAME	PETER THORKELOW																																																																																																																																																				
STREET ADDRESS	1511 WHISPERING OAKS CIR.																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34110																																																																																																																																																				
TITLE	EXECUTIVE OFFICER	☐ Change ☒ Addition																																																																																																																																																			
NAME	JAMES McDONALD																																																																																																																																																				
STREET ADDRESS	700 DIAMOND CIRCLE # 8																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34110																																																																																																																																																				
TITLE	ADMINISTRATOR OFFICER	☐ Change ☒ Addition																																																																																																																																																			
NAME	JAMES LAWSON																																																																																																																																																				
STREET ADDRESS	832 CARRICK BEND DR																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34110																																																																																																																																																				
TITLE	JOHN SECRETARY	☐ Change ☒ Addition																																																																																																																																																			
NAME	JOHN GILL																																																																																																																																																				
STREET ADDRESS	3142 W. CROWN POINT BLVD																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34112																																																																																																																																																				
TITLE	DIRECTOR	☐ Change ☒ Addition																																																																																																																																																			
NAME	MARNIE M'NEELY																																																																																																																																																				
STREET ADDRESS	20712 COUNTY BARN RD.																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 33928																																																																																																																																																				
TITLE	DIRECTOR	☐ Change ☒ Addition																																																																																																																																																			
NAME	DOUGLAS WAGNER																																																																																																																																																				
STREET ADDRESS	5342 GUADELOUPE WAY																																																																																																																																																				
CITY-ST-ZIP	NAPLES, FL 34119																																																																																																																																																				
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:  ARTHUR S. LANE 29 MAR 2004 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																																																																					

94040012

