SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
1995 JUL 20 AM 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 731855 (3)

1. Corporation Name

HOLLYWOOD POWER SQUADRON, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
213 N 31ST RD HOLLYWOOD FL 33021	7300 DAVIE RD EXT APT 220 HOLLYWOOD FL 33024 US

3. Date Incorporated or Qualified: 02/13/1975
3a. Date of Last Report: 04/25/1994
4. FEI Number: 59-4055692 ☐ 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 ☒ FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 801 S. Federal Hwy	26 same
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Hollywood, FL. 33020	28 City & State
24 Zip: 33020 25 Country: USA	29 Zip 30 Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BACEN, STEPHEN F 7879 HOLLYWOOD BOULEVARD PEMBROKE PINES FL 33024	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	TD COOKE, DENISE 7300 DAVIE RD. EXT. APT. 220 HOLLYWOOD FL	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP	TD Richard H. Snow 801 S. Federal Hwy. Hollywood, FL. 33020	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D MOODY, HOWARD 463 NW 8TH DR. FT. LAUDERDALE FL	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP	D Ray Stephens 531 Leslie Dr. Hallandale, FL. 33009	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D POLANCO, JOE R 429 N HIGH LANIS DR HOLLYWOOD FL	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D SHELTON, GAICE M 2311 HAYES ST HOLLYWOOD FL	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D THILL, JOHN F 2311 HAYES ST HOLLYWOOD FL	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PD TURTZ, ISIDORE 101 SW 132 WAY, APT. J211 PEMBROKE PINES FL	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP		☐ Change ☐ Addition

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 119.07(3)(k), 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.

SIGNATURE: John F. Thill 6-30-95 (305) 935-2255
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (3/95)

0006242