

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 737965 (4)

1. Corporation Name

BOCA CIEGA POWER SQUADRON, INC.



Principal Place of Business

Mailing Address

130 126TH AVENUE EAST
TREASURE ISLAND FL 33706

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TREASURE ISLAND FL 33706

3. Date Incorporated or Qualified
02/01/1977

3a. Date of Last Report
06/08/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

95-1715554

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

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

LANEAU JR., RICHARD E
4558 32ND AVE NORTH
ST PETERSBURG FL 33713

81 Name

Robert C. Urban

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

6439 Second Palm Point

83 City

ST Ptk Bch

FL

85 Zip Code

33706

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/22/96

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME SEGUNDO, ERNEST C.
STREET ADDRESS 788 COLUMBUS DRIVE
CITY-ST-ZIP TIERRA VERDE FL

TITLE D ☒ DELETE
NAME GREENFIELD, GEORGE
STREET ADDRESS 12438 FIRST ST N
CITY-ST-ZIP TREASURE ISLAND FL

TITLE D ☐ DELETE
NAME HUGHES, HENRY C.
STREET ADDRESS 12394 MONARCH CR
CITY-ST-ZIP SEMINOLE FL

TITLE S ☐ DELETE
NAME KELLER, JAN
STREET ADDRESS 6570 HILLSIDE AVE
CITY-ST-ZIP SEMINOLE FL

TITLE D ☐ DELETE
NAME FLEMING, JAMES E.
STREET ADDRESS 5817 SKIMMER PT BLVD SOUTH
CITY-ST-ZIP GULF PORT FL

TITLE T ☐ DELETE
NAME LANEAU JR., RICHARD E.
STREET ADDRESS 4558 32ND AVE NORTH
CITY-ST-ZIP ST PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T ☐ Change ☒ Addition
1.2 NAME Robert C. Urban
1.3 STREET ADDRESS 6439 Second Palm Point
1.4 CITY-ST-ZIP ST Ptk Bch, FL 33706

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME JAMES T. LAWRENCE
2.3 STREET ADDRESS 19651 GULF BND A13
2.4 CITY-ST-ZIP Indian Shores, FL 33435

3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME RICHARD E LANEAU JR
3.3 STREET ADDRESS SAME
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

RICHARD E. LANEAU JR.

1/18/96 813-522-4726

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E037 (12/95)