## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Feb 17, 2005 8:00 am **Secretary of State DOCUMENT #739370** 02-17-2005 90018 045 \*\*\*\*61.25 SAN CARLOS BAY SAIL & POWER SQUADRON INC Principal Place of Business Mailing Address P.O. BOX 5026 P.O. BOX 5026 FORT MYERS BEACH, FL 33932 FORT MYERS BEACH, FL 33932 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. 02142005 Chg-NP CR2E037 (10/03) 4. FEI Number 23-7027967 City & State City & State Applied For Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HELEN C. WILHELM COWAN, DORIS J Street Address (P.O. Box Number is Not Acceptable) 1477 SANDLEWOOD DR 428917HRINKRV1749 FT MYERS, FL 33919 City FORT My ETES 6. 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 \$5.00 May Be Added to Fees 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITE F Delete TITLE Change ☐ Addition RASONE, JOHN J NAME NAME 8140 BREATON CIR STREET ADDRESS STREET ADDRESS FORT MYERS, FL 33912 CITY-ST-ZIP CITY-ST-ZIP TITLE D-Defete ☐ Change ■ Addition MCPHAIL, DOY NAME NAME 4800 ALBACORE LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33919 CITY-ST-ZIP TITLE Delete TITLE M Addition BLUMEN feld, BerALD BLUMENFELD, GERALD J NAME NAME 10100 CYPRESS COVE 9545 MARINERS COVE LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33919 CITY-ST-ZIP 33908 ☐ Delete TITLE ☐ Addition TELLE COWAN, DORIS NAME NAME STREET ADDRESS 1477 SADDLEWOODE DR STREET ADDRESS FT MYERS, FL 33919 CITY-ST-7IP CITY-ST-ZIP TITLE (ZZ) Delete TITLE Z Addition WILLIELD, HELEN E HARPER, GOLDEN NAME NAME 4289 MARINER WAY #210 STREET ADDRESS 19733 VINTAGE TRACE CIR STREET ADDRESS FORT MYERS, FL 33912 CITY-ST-ZIP CITY-ST-ZIP Detete ☐ Change Z Addition TITL F TITLE KOHL, LEO 8847 STAGHORN WAY FORT MYERS, FL 3 BLOCK, PETER NAME NAME STREET AUDRESS 5411 HARBORAGE DR STHEET ADDRESS

FILED

12. Thereby 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.

CITY-SI-ZIP

FORT MYERS, FL 33908

CHY-SI-7IP

HELEN WILHELM) 2-15-65 (239)489-024 SIGNATURE: 1