2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742645

FILED Jan 05, 2010 Secretary of State

Entity Name: PONCE DE LEON INLET SAIL AND POWER SQUADRON, INC.

Current Principal Place of Business: New Principal Place of Business:

2021 WATERFORD EST. DR

NEW SMYRNA BCH, FL 32168 US

Current Mailing Address: New Mailing Address:

2021 WATERFORD EST. DR

NEW SMYRNA BCH, FL 32168 US

FEI Number: 59-1695087 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALLEN, LINDA C 2021 WATERFORD EST. DR NEW SMYDNA BOH, FL 32168

NEW SMYRNA BCH, FL 32168 US

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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: WILLWERTH, LAWRENCE

Address: 367 HACIENDA

City-St-Zip: EDGEWATER, FL 32141

Title: DV

Name: REICHERT, PAUL Address: 891 SNOOK AVE

City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: DV

Name: BENNY, WILLIAM C
Address: 2319 UMBRELLA TREE DR
City-St-Zip: EDGEWATER, FL 32141

Title: DV

Name: REICHERT, ELAINE Address: 891 SNOOK AVE

City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title:

Name: COURAGE, MYRNA M Address: 1600 N ATLANTIC AVE

City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title:

Name: ALLEN, LINDA C

Address: 2021 WATERFORD ESTATES DRIVE City-St-Zip: NEW SMYRNA BEACH, FL 32168 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: LINDA C. ALLEN TREA 01/05/2010