2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742645

FILED Jan 06, 2012 Secretary of State

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

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

438 BOUCHELLE DRIVE SUITE 301

NEW SMYRNA BCH, FL 32169 US

Current Mailing Address: New Mailing Address:

438 BOUCHELLE DRIVE

SUITE 301

NEW SMYRNA BCH, FL 32169 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 438 BOUCHELLE DRIVE SUITE 301 NEW SMYRNA BCH, FL 32169 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: BENNY, WILLIAM C
Address: 2319 UMBRELLA TREE DR
City-St-Zip: EDGEWATER, FL 32141

Title: DV

Name: WOODS, DON R Address: 378 GLENEAGLES DR

City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: DV

Name: JOHNSON, ROBERT D
Address: 353 HEARTHSTONE TERRACE
City-St-Zip: PORT ORANGE, FL 32127

Title: DV

 Name:
 MOSES, LORA E

 Address:
 23 PELICAN LANE

 City-St-Zip:
 EDGEWATER, FL 32141

Title: S

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

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

Title:

Name: BENNY, DENISE

Address: 2319 UMBRELLA TREE DR City-St-Zip: EDGEWATER, FL 32141 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 AT 01/06/2012