2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2002 8:00 am
Secretary of State
01-29-2002 90057 043 ****70.00

DOCUMENT # 743149

1. Entity Name

SARASOTA R/C SQUADRON, INC.

Principal Place of Business	Mailing Address
1304 OAK VIEW DR. 2252 SHADOW LAKES DR. SARASOTA FL 34240 US	4411 BEE RIDGE ROAD BOX 394 SARASOTA FL 34233 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
173 WINDWARD DR	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: OSPREY, FL	City & State
Zip: 34229 Country: US ~~SARASOTA~~	Zip / Country

4. FEI Number: 59-2641815 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HAY, JONATHAN 2252 SHADOW LAKES DRIVE SARASOTA FL 34240	Name: NEIL HANSEN Street Address (P.O. Box Number is Not Acceptable): 173 WINDWARD DR City: OSPREY FL Zip Code: 34229

8. 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: Neil W Hansen — NEIL W HANSEN, TREASURER, JAN 14, 2002
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HANSEN, NEIL 173 WINDWARD DRIVE OSPREY FL 34229	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FULLER, BRAD 7735 S. LEEWYNN DRIVE SARASOTA FL 34240	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GEORGE JENKINS 4634 MC INTOSH RD. SARASOTA, FL, 34233	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HAY, JOHNATHAN 2252 SHADOW LAKE DR SARASOTA FL 34240	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MIKE WINTER 4287 HEARTHSTONE DR. SARASOTA, FL, 34238-3232	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HESS, JAMES JR 507 SADDLEWOOD DRIVE SARASOTA FL 34233	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD PHILLIP BENDER 4014 GREEN TREE AVE. SARASOTA, FL., 34233	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby 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.

SIGNATURE: SIGNATURE REQUIRED Neil W Hansen — NEIL W HANSEN — JAN 14, 2002 — 941-966-7285
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #