2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743149

Entity Name: SARASOTA R/C SQUADRON, INC.

FILED Jan 06, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3812 STABLE LN

SARASOTA, FL 342352322 US

Current Mailing Address: New Mailing Address:

4411 BEE RIDGE ROAD BOX 394

SARASOTA, FL 34233 US

FEI Number: 59-2641815 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:

JENSEN, ALFRED G 3812 STABLE LN

SARASOTA, FL 34235 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition

 Title:
 TD () Delete
 Title:
 TD (X) Change

 Name:
 JENSEN, ALFRED G
 Name:
 JENSEN, ALFRED G

 Address:
 3812 STABLE LN
 Address:
 3812 STABLE LN

 City-St-Zip:
 SARASOTA, FL 342352322
 City-St-Zip:
 SARASOTA, FL 34235

Title: VPD () Delete Title: () Change () Addition

 Name:
 VELTRI, VINCE
 Name:

 Address:
 1304 OAK VIEW DR
 Address:

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:

 $\label{eq:title:sde} \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{SD} \qquad \mbox{(X) Change () Addition}$

 Name:
 WINTER, MIKE
 Name:
 JENKINS, GEORGE

 Address:
 4287 HEARTHSTONE DR
 Address:
 4634 MCINTOSH RD

 City-St-Zip:
 SARASOTA, FL 342383232
 City-St-Zip:
 SARASOTA, FL 342333

Title: PD () Delete Title: () Change () Addition

 Name:
 BENDER, PHILIP
 Name:

 Address:
 4014 GREEN TREE AVE
 Address:

 City-St-Zip:
 SARASOTA, FL 34233
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ALFRED G JENSEN TD 01/06/2004