

FILED

Jun 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPT. OF STATE Sandra J. Ham Secretary DIVISION OF CORPORATIONS
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DOCUMENT # **748539** (4)

Corporation Name

MARCO ISLAND POWER SQUADRON, INC.

Principal Place of Business

Mailing Address

231 N COLLIER BLVD.
MARCO ISLAND FL 33907231 N COLLIER BLVD.
MARCO ISLAND FL 34145-30113. Date Incorporated or Qualified
08/16/19793a. Date of Last Report
03/14/1996

21 Principal Place of Business	26 Mailing Address
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip	25 Country
29 Zip	30 Country

4. FEI Number
59-1922657Applied For
☐ Not Applicable5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**8. This corporation has liability for intangible tax, under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TOWER, DELL K.
1100 DANA CT
MARCO ISLAND FL 33907 34145

81 Name	SUSAN J. LAYTON
82 Street Address (P.O. Box Number is Not Acceptable)	1100 DANA CT
83	
84 City	MARCO ISLAND FL
85 Zip Code	34145

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Susan J. Layton

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D ☒ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	ULLMANN, CARL	1.2 NAME	
STREET ADDRESS	187 DAN RIVER CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL	1.4 CITY-ST-ZIP	
TITLE	S ☒ DELETE	2.1 TITLE	☐ Change ☒ Addition
NAME	SIMMONS, JAMES W.	2.2 NAME	Geo Taylor
STREET ADDRESS	694 W. ELKCAM CIR., SUITE 1111	2.3 STREET ADDRESS	278 POLYNESIA CT
CITY-ST-ZIP	MARCO ISLAND FL	2.4 CITY-ST-ZIP	MARCO ISLAND FL 34145
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	TOWER, DELL K.	3.2 NAME	
STREET ADDRESS	1100 DANA CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	HENNING, OWEN	4.2 NAME	
STREET ADDRESS	1128 BALD EAGLE, APT 103	4.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	LAYTON, SUSAN J.	5.2 NAME	
STREET ADDRESS	1100 DANA CT.	5.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL	5.4 CITY-ST-ZIP	
TITLE	T ☒ DELETE	6.1 TITLE	☐ Change ☒ Addition
NAME	FOWLER, RICHARD S	6.2 NAME	JOSEPH YOUNG
STREET ADDRESS	921 HYACINTH CT	6.3 STREET ADDRESS	1282 MULBERRY CT
CITY-ST-ZIP	MARCO ISLAND FL	6.4 CITY-ST-ZIP	MARCO ISLAND FL 34145

I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)