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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **748539**

1. Corporation Name SAIL &
MARCO ISLAND POWER SQUADRON, INC.

Principal Place of Business	Mailing Address
231 N COLLIER BLVD. MARCO ISLAND FL 33937	231 N COLLIER BLVD. MARCO ISLAND FL 33937

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 08/16/1979
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1922657 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

HENNINE, OWEN
847 OLD MARCO LANE
MARCO ISLAND FL 34145

10. Name and Address of New Registered Agent

81 Name: George L Taylor
82 Street Address (P.O. Box Number is Not Acceptable): 278 Polynesia
83 Marco Island FL
84 City: 34145 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	S	☐ DELETE	1.1 TITLE	Secretary	☐ Change ☑ Addition
NAME	GIBSON, VIRGINIA S.		1.2 NAME	Joanne Foote	
STREET ADDRESS	1281 6TH AVE		1.3 STREET ADDRESS	757 Pelican Ct	
CITY-ST-ZIP	MARCO ISLAND FL 34145		1.4 CITY-ST-ZIP	Marco Island, FL 34145	
TITLE	T	☑ DELETE	2.1 TITLE	Andrea Battaglia, P. Treasurer	☐ Change ☑ Addition
NAME	YOUNG, JOSEPH		2.2 NAME		
STREET ADDRESS	1282 MULLBERRY CT.		2.3 STREET ADDRESS	1450 Cutler Court	
CITY-ST-ZIP	MARCO ISLAND FL		2.4 CITY-ST-ZIP	Marco Island, FL 34145	
TITLE	D	☑ DELETE	3.1 TITLE	D Richard Robert Richardson	☐ Change ☑ Addition
NAME	TAYLOR, GEORGE L.		3.2 NAME		
STREET ADDRESS	278 POLYNESIA CT		3.3 STREET ADDRESS	1724 Wareand court	
CITY-ST-ZIP	MARCO ISLAND FL 34145		3.4 CITY-ST-ZIP	Marco Island Fl 34145	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LESCHEY, WILLIAM		4.2 NAME		
STREET ADDRESS	919 HURON CT		4.3 STREET ADDRESS		
CITY-ST-ZIP	MARCO ISLAND FL 34145		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	BRAUN, RICHARD R.		5.2 NAME		
STREET ADDRESS	778 PELICAN CT		5.3 STREET ADDRESS		
CITY-ST-ZIP	MARCO ISLAND FL 34145		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: Andrea Battaglia SIGNED 1-25-99 (941) 642-5721
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #