

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90038 006 ****61.25

DOCUMENT # N01000003004

1. Entity Name
TITUSVILLE SAIL AND POWER SQUADRON, INC.



Principal Place of Business
KAREN ANDROS
4605 ASHLEY DR
TITUSVILLE, FL 32780

Mailing Address
4605 ASHLEY DR
TITUSVILLE, FL 32780

2. Principal Place of Business - No P.O. Box #
2892 LONG LAKE DRIVE
Suite, Apt. #, etc.

3. Mailing Address
2892 LONG LAKE DRIVE
Suite, Apt. #, etc.



04162008 Chg-NP CR2E037 (12/06)
59-6151066

City & State
TITUSVILLE, FL

City & State
TITUSVILLE, FL

4. FEI Number
NOT APPLICABLE
Applied For
Not Applicable

Zip
32780

Country
USA

Zip
32780

Country
USA

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

6. Name and Address of Current Registered Agent

ANDROS, KAREN M
4605 ASHLEY DR
TITUSVILLE, FL 32780

7. Name and Address of New Registered Agent

Name **JOHN A CARLSON JR**
Street Address (P.O. Box Number is Not Acceptable)
2892 LONG LAKE DRIVE
City **TITUSVILLE** **FL** Zip Code **32780**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **John A Carlson Jr** **JOHN A CARLSON JR TREASURER** **4/16/08**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SED CARLSON, JOHN A 7892 LONGLAKE DR TITUSVILLE, FL 32780	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDR DUNN, JOSEPH H JR 905 ALABAMA ST TITUSVILLE, FL 32796	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A BANDILLA, JOYCE M 1736 PRIVATEER DR TITUSVILLE, FL 32796	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EXD BANDILLA, MATTHEW W 1736 PRIVATEER DR TITUSVILLE, FL 32796	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FLINT, ROSA 23 BROAD ST TITUSVILLE, FL 32796	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ANDROS, KAREN M 4605 ASHLEY DR TITUSVILLE, FL 32780	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SED DUNN, JOSEPH H JR 905 ALABAMA ST TITUSVILLE, FL 32796	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDR BANDILLA, MATTHEW W 1736 PRIVATEER DR TITUSVILLE, FL 32796	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADMIN MERRITT, ROY KEITH 3909 CHAMPION RD TITUSVILLE, FL 32796	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EXD ANDROS, KAREN M 4605 ASHLEY DR TITUSVILLE, FL 32780	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LENNON, RAYMOND 930 LUNDY ST TITUSVILLE, FL 32796	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARLSON, JR. JOHN A 2892 LONG LAKE DRIVE TITUSVILLE, FL 32780	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: **John A Carlson Jr** **JOHN A CARLSON JR** **4/16/08** **(321) 269-1083**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #