

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007852

FILED
Jan 06, 2009
Secretary of State

Entity Name: GAINESVILLE SAIL AND POWER SQUADRON, INC.

Current Principal Place of Business:

4424 SW 13 ST
SUITE C-2
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

15314 SW WILLISTON RD
MICANOPY, FL 32667

New Mailing Address:

FEI Number: 76-0764938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDSON, JIB
4424 NW 13 ST
SUITE C-2
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CLARK, MARK C
Address: 9530 SW 1 PL
City-St-Zip: GAINESVILLE, FL 32607

Title: DV () Delete
Name: BOULWARE, GARY W
Address: 114 NW 2 WAY
City-St-Zip: GAINESVILLE, FL 32607

Title: DV () Delete
Name: MAXWELL, JOHN R
Address: 2210 NW 44 PL
City-St-Zip: GAINESVILLE, FL 32605

Title: DS () Delete
Name: MCKINNEY, MICHAEL H
Address: 15314 SW WILLISTON RD
City-St-Zip: MICANOPY, FL 32667

Title: DT () Delete
Name: MCKINNEY, MICHAEL H
Address: 15314 SW WILLISTON RD
City-St-Zip: MICANOPY, FL 32667

Title: DV () Delete
Name: TEISS, DAVID M
Address: 11619 NW 2 AV
City-St-Zip: GAINESVILLE, FL 32607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BOULWARE, GARY
Address: 114 NW 116TH WAY
City-St-Zip: GAINESVILLE, FL 32607

Title: DV (X) Change () Addition
Name: GRAF, LOUIS W
Address: 5808 NW 72ND STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: DAVIDSON, ALBERT J
Address: 6425 NW 54TH WAY
City-St-Zip: GAINESVILLE, FL 32653

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MICHAEL H. MCKINNEY

DV

01/06/2009

Electronic Signature of Signing Officer or Director

Date