

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 08, 2009
Secretary of State

DOCUMENT# N05593

Entity Name: BISCAYNE BAY POWER SQUADRON, INC.

Current Principal Place of Business:290-174TH STREET
APT #1215
SUNNY ISLES, FL 33160 US**Current Mailing Address:**290-174TH ST
APT #1215
SUNNY ISLES, FL 33160**New Principal Place of Business:**9821 SUNRISE LAKES BLVD.
APT #112
SUNRISE, FL 33322 US**New Mailing Address:**9821 SUNRISE LAKES BLVD.
APT #112
SUNRISE, FL 33322 US

FEI Number: 59-6147746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:KATZ, BONNIE
290-174TH STREET
APT #1215
SUNNY ISLES, FL 33160 US**Name and Address of New Registered Agent:**LEON, BARBARA
9821 SUNRISE LAKES BLVD.
APT #112
SUNRISE, FL 33322 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: BARBARA LEON

12/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: KATZ, BONNIE
Address: 290 - 174 STREET #1215
City-St-Zip: SUNNY ISLES, FL 33160 USTitle: D () Delete
Name: BARAFF, MARJORIE
Address: 381 JOY HAVEN DR.
City-St-Zip: SEBASTIAN, FL 32958Title: SED () Delete
Name: FRISCHMAN, JAY LT/C
Address: 15322 SW 72 STREET #12
City-St-Zip: MIAMI, FL 33193 USTitle: TD () Delete
Name: LEON, BARBARA LTC
Address: 9821 SUNRISE LAKES BLVD #112
City-St-Zip: SUNRISE, FL 33322Title: CDR (X) Delete
Name: MARSHA, FRISCHMAN
Address: 15322 SW 72 STREET # 12
City-St-Zip: MIAMI, FL 33193**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change () Addition
Name: BARAFF, MARJORIE PC
Address: 381 JOY HAVEN DRIVE
City-St-Zip: SEBASTIAN, FL 32958 USTitle: TD (X) Change () Addition
Name: LEON, BARBARA LT/C
Address: 9821 SUNRISE LAKES BLVD. APT # 112
City-St-Zip: SUNRISE, FL 33322Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: CDR (X) Change () Addition
Name: MARSHA, FRISCHMAN
Address: 15322 SW 72 STREET APT # 12
City-St-Zip: MIAMI, FL 33193Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARJORIE BARAFF

PC

12/08/2009

Electronic Signature of Signing Officer or Director

Date