

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05595

FILED  
Apr 16, 2006  
Secretary of State

**Entity Name:** DISTRICT 8, UNITED STATES POWER SQUADRONS, INC.

**Current Principal Place of Business:**

1415 TRUMAN AVENUE  
KEY WEST, FL 330407251 US

**New Principal Place of Business:**

**Current Mailing Address:**

1415 TRUMAN AVENUE  
KEY WEST, FL 330407251 US

**New Mailing Address:**

**FEI Number:** 59-6203038

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CENTORINO, DIANA  
2601 BARBARA DRIVE  
FORT LAUDERDALE, FL 333163233 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: DS ( ) Delete  
Name: DOUGHERTY, THOMAS R II  
Address: 1575 EUCLID AVENUE, # 501  
City-St-Zip: MIAMI BEACH, FL 331393537

Title: DC ( ) Delete  
Name: SCHULKE, GLORIA J  
Address: 1249 LARKSPUR STREET  
City-St-Zip: SEBASTIAN, FL 329588847 US

Title: DEO ( ) Delete  
Name: RAY, RONALD M  
Address: 4441 NE 15TH AVENUE  
City-St-Zip: OAKLAND PARK, FL 333344714 US

Title: DEO ( ) Delete  
Name: POPHAM, LEE  
Address: 7101 SW 67TH AVENUE  
City-St-Zip: SOUTH MIAMI, FL 331433151 US

Title: DT ( ) Delete  
Name: GILLETTE, WILLIAM R  
Address: 1415 TRUMAN AVENUE  
City-St-Zip: KEY WEST, FL 330407251 US

Title: DAO ( ) Delete  
Name: WILLIAMS, SALLY  
Address: 103 LOST BRIDGE DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 334104469 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DS (X) Change ( ) Addition  
Name: DOUGHERTY, THOMAS R II  
Address: 2000 NE 135TH ST APT 704  
City-St-Zip: N MIAMI, FL 331812105

Title: DAO (X) Change ( ) Addition  
Name: MITCHELSON, PETER W  
Address: 724 N FISCHER CIRCLE  
City-St-Zip: SEBASTIAN, FL 329584623 US

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

Title: DC (X) Change ( ) Addition  
Name: POPHAM, LEE  
Address: 7101 SW 67TH AVENUE  
City-St-Zip: SOUTH MIAMI, FL 331433151 US

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

Title: DXO (X) Change ( ) Addition  
Name: WILLIAMS, SALLY  
Address: 103 LOST BRIDGE DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 334104469 US

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM R GILLETTE

DT

04/16/2006

Electronic Signature of Signing Officer or Director

Date