2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

KEY WEST FL 33040

3. Mailing Address

City & State

Zip

6. Name and Address of Current Registered Agent

SOUTHERN MOST CPOA

USCG GROUP KEY WEST

Suite, Apt. #, etc.

DOCUMENT # N15696

1. Entity Name

Principal Place of Business

2. Principal Place of Business

BAUSKA, BRADLEY R

USCG GROUP KEY WEST KEY WEST FL 33040

SOUTHERN MOST CPOA

USCG GROUP KEY WEST

Suite, Apt. #, etc.

City & State

Zip

KEY WEST FL 33040

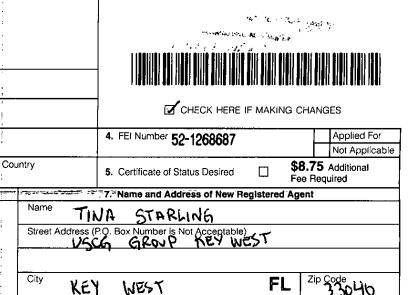
THE SOUTHERNMOST CHAPTER OF THE UNITED STATES CO AST GUARD CHIEF PETTY OFFICERS ASSOCIATION, INC.

Country



FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90655 005 ****61.25



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 DATE d or printed name of registered agent and title if ap (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE 19 \$ \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 ** なOFFICERS AND DIRECTORS 11. Delete PD Addition TITLE VD TITLE Change van Essen, John 🗥 LARRY TAYLOR NAME NAME USCG GROUP KEY WEST USCG GROUP KEY WEST STREET ADDRESS STREET ADDRESS KEY WEST FL 33040 CITY-ST-ZIP CITY-ST-7IP KEY WEST, FL 33040 Delete ☐ Change Addition TITLE TITLE reid. Rändolph G NAME NAME EDWIN ORTIZ USCG GROUP KRY WEST STREET ADDRESS USCG GROUP KEY WEST STREET ADDRESS CITY-ST-7IF CITY-ST-7IP KEY WEST FL 33040 KEY WEST, FL 73040 Delete Change Addition TITLE TITLE BAILEY, JOSEPH TINA STARLING NAME NAME STREET ADDRESS USCG GROUP KEY W STREET ADDRESS USCG GROUP KEYWEST CITY-ST-ZIP CITY-ST-ZIP KEY WEST FL 33040 KRY WEST FL 33040 Nelete TITLE ☐ Change Addition TITLE Taylor, Joseph BLAKE MABE NAME **NAME** STREET ADDRESS USCG GROUP KEY WEST STREET ADDRESS USCA GROUP CITY-ST-ZIP CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 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:

SIGNATIONES CONCEPED

CR2E037 (10/0