2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001839

Entity Name: GULF BREEZE SAIL AND POWER SQUADRON, INC.

FILED Jul 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 907 AQUAMARINE GULF BREEZE, FL 32563 **Current Mailing Address: New Mailing Address:** 907 AQUAMARINE GULF BREEZE, FL 32563 FEI Number: 59-3125505 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SEATON, CAROLLE 907 AQUAMARINE DR GULF BREEZE, FL 32563 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete THORNBURG, HELEN CAROL Name: Name: 6547 CASA DEL MAR Address: Address: City-St-Zip: NAVARRE, FL 32566 City-St-Zip: Title: DC () Delete Title: () Change () Addition Name: SEATON, CAROLLE C Name: Address: 907 AQUAMARINE DR Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROANTREE, JAMES E STIFFLER, DONALD R Name: Name: 200 PENSACOLA BEACH RD., #L-6 Address: 4740 HURON DR Address: City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: GULF BREEZE, FL 32561 Title: DAO () Delete Title: DAO (X) Change () Addition TOLBERT, FRED E III Name: Name: NEWTON, BOB 1500 MIRACLE STRIP PKWY SE 965 CORONADO DRIVE Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: GULF BREEZE, FL 32563 Title: DEO () Delete Title: DEO (X) Change () Addition SMITH, WALTER LEWIS, RICHARD Name: Name: 102 E GARDEN ST **BOX 11** Address: Address: City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: BAGDAD, FL 32530 Title: () Delete Title: () Change (X) Addition BURNS, CHARLES Name: Name: Address: Address: 226 PINETREE DR. GULF BREEZE, FL 32561 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DONALD R. STIFFLER DT 07/15/2004