2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001839

FILED Apr 24, 2007 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 2861 WHISPER LAKE DR. GULF BREEZE, FL 32563 **Current Mailing Address: New Mailing Address:** 2861 WHISPER LAKE DR. 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: MCDARIS, HZ 2861 WHISPER LAKE DR. US 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, CAROL Name: Name: 3246 CASA DEL MAR Address: Address: City-St-Zip: NAVARRE, FL 32566 City-St-Zip: Title: DXO () Delete Title: DXO (X) Change () Addition KNIGHT, BERNIE Name: MYRAN, JOHN Name: Address: 6032 LANCASTER CT. Address: 906 AQUAMARINE DR City-St-Zip: PACE, FL 32571 City-St-Zip: GULF BREEZE, FL 325613002 Title: DAO () Delete Title: DAO (X) Change () Addition JONES, LORING JONES, LORING Name: Name: Address: 3258 DUKE DR. Address: 7706 FAIRFIELD DR #3 City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: PENSACOLA, FL 32501 Title: DEO () Delete Title: DEO (X) Change () Addition Name: MEPHAM, THERESA A Name: GRIFFIN, JOHN 1007 CORONADO DR. Address: Address: 4015 W. MADURA City-St-Zip: GULF BREEZE, FL 32561 City-St-Zip: GULF BREEZE, FL 32561 Title: DT () Delete Title: () Change () Addition MCDARIS, HZ Name: Name: 2861 WHISPER LAKE DR. Address: Address: City-St-Zip: GULF BREEZE, FL 32563 City-St-Zip: Title: (X) Delete Title: () Change () Addition SEATON, CAROLLE Name: Name: Address: 907 AQUAMARINE DR. Address: GULF BREEZE, FL 32563 City-St-Zip: 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: HERSCHEL Z. MCDARIS DT 04/24/2007