2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005478

City-St-Zip:

SUMMERFIELD, FL 34491

Entity Name: OCALA SAILING CLUB, INC.

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 15303 SE 105TH TER RD SUMMERFIELD, FL 34491 US **Current Mailing Address: New Mailing Address:** P O BOX 2191 OCALA, FL 34478 US FEI Number: 65-0481441 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: BIRKENMEYER, WAYNE 15303 SE 105TH TER RD SUMMERFIELD, FL 34491 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: TRD () Change () Addition () Delete BIRKENMEYER, WAYNE Name: Name: Address: 15303 SE 105TH TERRACE ROAD Address: City-St-Zip: SUMMERFIELD, FL 34491 City-St-Zip: Title: PD () Delete Title: PD (X) Change () Addition Name: SIMS, EDWARD Name: MATTHEUS, JACK Address: 11441 SE 161ST PL Address: 6300 N. US HIWAY 27 City-St-Zip: SUMMERFIELD, FL 34491 City-St-Zip: OCALA, FL 34482 Title: VD. () Delete Title: (X) Change () Addition ARCHIBALD, SKIP HULT, JOHN Name: Name: 3381 NE 56TH AVE 1 SE CHINICA DRIVE Address: Address: City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: SUMMERFIELD, FL 34491 Title: SD () Delete Title: () Change () Addition Name: STAKENBORG, LIZ Name: Address: 10705 SE 151ST STREET Address:

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.

City-St-Zip:

SIGNATURE: WAYNE BIRKENMEYER TREA 01/03/2007