


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2007 8:00 am
Secretary of State

09-04-2007 90042 021 ****80.00

DOCUMENT # 744615					
1. Entity Name FIGHTIN GATOR TOUCHDOWN CLUB, INC.					
Principal Place of Business P.O. BOX 147050 GAINESVILLE, FL 32614		Mailing Address PMB 002 POST OFFICE BOX 147050 GAINESVILLE, FL 32614			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1930965	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
VAUGHN, NORMAN 605 NW 1ST STREET HIGH SPRINGS, FL 32643			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAUGHN, NORMAN R		NAME		
STREET ADDRESS	605 NW 1ST STREET		STREET ADDRESS		
CITY-ST-ZIP	HIGH SPRINGS, FL 32643		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORTON, JENNIFER		NAME		
STREET ADDRESS	2040 NE 17TH TERR.		STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE, FL 32609		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORNES, JOHNNY L		NAME		
STREET ADDRESS	5904 NW 31 TERR		STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE, FL 32653		CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PORTER, DARREN		NAME	PORTER, DARREN	
STREET ADDRESS	571 NE 151 TER		STREET ADDRESS	571 NE 151 TER	
CITY-ST-ZIP	WILLISTON, FL 32696		CITY-ST-ZIP	WILLISTON, FL 32696	
TITLE	VD	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COMBS, BILLY		NAME	COMBS, BILLY	
STREET ADDRESS	3954 NW 42 CT		STREET ADDRESS	3954 NW 42 CT	
CITY-ST-ZIP	GAINESVILLE, FL 32606		CITY-ST-ZIP	GAINESVILLE, FL 32606	
TITLE		<input type="checkbox"/> Delete	TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	CROY, MICHAEL	
STREET ADDRESS			STREET ADDRESS	1775B NW 188 ST	
CITY-ST-ZIP			CITY-ST-ZIP	HIGH SPRINGS, FL 32643	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Norman R. Vaughn</i>		NORMAN R. VAUGHN (TD)		8/29/07 (386)454-5502	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

ATTACHMENT 40131180

~~#744615~~

ADDITIONS TO BLOCK 11

Mollman, Ken D
5035 NW 76th Lane
Gainesville, FL 32653

Joe Bartlett
8401 NW 13 Street, #16
Gainesville, FL 32653

Nelson, Terry D
4118 NW 36th Street
Gainesville, FL 32605

Tom Mason D
13624 SW 87 Street
Archer, FL 32618

Benthall, Bob D
1318 SW 122nd St
Gainesville, FL 32607

Tanner, Mike D
2614 SW 34 Street
Gainesville, FL 32608

John Swymer D
12215 SW 154 Street
Archer, FL 32618

Heisner, John D
8728 SW 152 Ave
Archer, FL 32618

Williams, Brian D
14891 NE 11 Place
Williston, FL 32696