

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002064

FILED
Sep 24, 2004
Secretary of State

Entity Name: OVIEDO HIGH SCHOOL NJROTC BOOSTER CLUB, INC.

Current Principal Place of Business:

601 KING ST.
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

601 KING ST.
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-3633590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARDO, JOSEPH F ESQ.
1191 NEWTON COURT
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: RUPING, ED
Address: 1080 MANIGAN AVE
City-St-Zip: OVIEDO, FL 32765

Title: VP () Delete
Name: PANTOLIANO, LORI
Address: 1017 GWYN CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: TD () Delete
Name: SANDERSON-BLUE, B.J.
Address: 2087 WETBOURNE DR
City-St-Zip: OVIEDO, FL 32765

Title: SD () Delete
Name: BUFFOMANTE, SANDY
Address: 2153 WESTBOUNE DR.
City-St-Zip: OVIEDO, FL 32765

Title: MD () Delete
Name: RUPING, KATHY
Address: 1080 MANIGAN AVE.
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RUPING

PD

09/24/2004

Electronic Signature of Signing Officer or Director

Date