NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

## DOCUMENT # N9700005658

1. Corporation Name

NONCOMMISSIONED OFFICERS' CLUB OF SAINT AUGUSTIN

Principal Place of Business 190 SAN MARCO AVE ST AUGUSTINE FL

2. Principal Place of Business

Suite, Apt. #, etc.

22

Mailing Address

190 SAN MARCO AVE ST AUGUSTINE FL

2a. Mailing Address

Suite, Apt. #, etc.

26

27

## **FILED** Mar 02, 1999 8:00 am secretary of State

03-02-1999 90163 038 \*\*\*\*61.25



3. Date Incorporated or Qualifed

10/07/1997

4. FEI Number 59-3446036

29   20   20   30   Trust Fund Contribution   \$5.00 May 80 Addition   25   29   30   30   Trust Fund Contribution   \$5.00 May 80 Addition   25   20   20   30   Trust Fund Contribution   \$5.00 May 80 Addition   25   20   20   30   Trust Fund Contribution   \$5.00 May 80 Addition   25   20   20   30   Trust Fund Contribution   \$5.00 May 80 Addition   25   20   20   30   Trust Fund Contribution   \$5.00 May 80 Addition   25   20   20   20   20   20   20   20	City & State		City & State			5. Certificate of Status Desired	\$8.75 A		
Part	23	<u> </u>	28				Fee Rec	quired	
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name  WOODRUFF, WOODY 3703 BLUFF LANE ST AUGUSTINE FL  12. Street Address (P.O. Box Number is Not Acceptable)  13. City  FL  14. City  FL  15. East Zip Code  14. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florids Statutes, the above-named corporation submits this statement for the purpose of office or registated segrets, or both, in the State of Florids. Such 617,0503, Florids Statutes, the above-named corporation's board of directors. Thereby should be appointment as registered office or registated segrets, or both, in the State of Florids. Such 617,0503, Florids Statutes, the above-named corporation's board of directors. Thereby should be appointment as registered office or registated and an interview with a state accept the oppointment as registered agent of the corporation's board of directors. Thereby should be appointment as registered agent of the corporation's board of directors. Thereby should be appointment as registered agent of the corporation's board of directors. Thereby should be appointment as registered agent of the corporation's board of directors. Thereby should be appointment as registered agent of the corporation's board of directors. Thereby should be appointment as registered agent of the purpose of the purpose of the appointment as registered agent of directors. Thereby should be appointment as registered agent of the corporation's poor the purpose of the appointment as registered agent of the corporation's poor the appointment as registered agent of the corporation's poor the appointment as registered agent of the corporation's poor the appointment as registered agent and the r	Zip	Country	Zip	Country	1	6. Election Campaign Financing			
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WOODRUFF, WOODY 3703 BLUFF LANE ST AUGUSTINE FL  32 Street Address (P.O. Box Number is Not Acceptable)  32 Street Address (P.O. Box Number is Not Acceptable)  33 BLUFF LANE ST AUGUSTINE FL  34 City  FL  35 Zip Code  36 City  FL  35 Zip Code  36 City  FL  36 City  FL  36 City  FL  36 City  FL  37 Zip Code  38 Addition symptotic or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heraby accept the appointment as registered agent, i am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  38 City  39 STORET ADDRESS  30 OFFICERS AND DIRECTORS  30 OFFICERS AND DIRECTORS  31 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12 NAME  13 STREET ADDRESS  14 AUGUSTINE FL 32082  14 AUGUSTINE FL 32082  15 AUGUSTINE FL 32085  17 AUGUSTINE FL 32086  18 AUGUSTINE FL 32086  19 AUGUSTINE FL 32086  10 AUGUSTINE FL 32086  10 AUGUSTINE FL 32086  10 AUGUSTINE FL 32086  11 AUGUSTINE FL 32086  12 AUGUSTINE FL 32086  13 AUGUSTINE FL 32086  14 AUGUSTINE FL 32086  15 AUGUSTINE FL 32086  16 AUGUSTINE FL 32086  17 AUGUSTINE FL 32086  17 AUGUSTINE FL 32086  17 AUGUSTINE FL 32086  17 AUGUSTINE FL 32086  18 AUGUSTINE	Name and Address of Current Registered Agent								
3703 BLUFF LANE ST AUGUSTINE FL  ST AUGUSTINE FL 32092  THE  NAME  NESTER, DANIEL  STREET ADDRESS  STEEL AUGUSTINE FL 32095  THE  ST AUGUSTINE FL 32095  THE  ST AUGUSTINE FL 32095  THE  ST AUGUSTINE FL 32085  THE  THE  THE  THE  THE  THE  THE  TH				81	Name	•		Ī	
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Signature, typed of printed carene of regulateral and side if application. (NOTE: Registered Agent and procured when retreatable)   OATE									
TITLE PD   Change   C	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE  OATE								
LILES, DARYL   12   NAME   CITY-ST-ZIP   ST. AUGUSTINE FL 32092   13   STREET ADDRESS   2991 BAY STREET   13   STREET ADDRESS   14   CITY-ST-ZIP   ST. AUGUSTINE FL 32092   14   CITY-ST-ZIP   ST. AUGUSTINE FL 32092   14   CITY-ST-ZIP   ST. AUGUSTINE FL 32092   15   CITY-ST-ZIP   ST. AUGUSTINE FL 32092   16   Change   Addition   Addition   NESTER, DANIEL   22   NAME   22   NAME   22   STREET ADDRESS   23   STREET ADDRESS   24   CITY-ST-ZIP   ST. AUGUSTINE FL 32085   31   TITLE   SD   LINGOLD, JENNIFER   32   NAME   LINGOLD, JENNIFER   33   STREET ADDRESS   17   AUGUSTINE FL 32085   34   CITY-ST-ZIP   ST. AUGUSTINE FL 32085   35   CITY-ST-ZIP   ST. AUGUSTINE FL 33   CITY-ST-ZIP   ST. AUGUSTINE FL 34   CITY-ST-ZIP   ST. AUGUSTINE FL 35   CITY-ST-ZIP   ST. AUGUSTINE FL 35   CITY-ST-ZIP   Change   Addition   Addition   CITY-ST-ZIP   Change   Addition   CITY-ST-ZIP   Change   Addition   CITY-ST-ZIP   CITY-ST-ZIP   Change   Addition   CITY-ST-ZIP   CITY-ST-ZIP   CITY-ST-ZIP   Change   Addition   CITY-ST-ZIP   CITY-				-					
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CT ALICHICTANE EL	STREET ADDRESS	3703 BLUFF LANE		6.3 STREE	TADDRESS	8			
UIT-51-2P ST AUGUSTINE TO A PROPERTY OF THE PR	CITY-ST-ZIP	ST AUGUSTINE FL							

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(t). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

Applied For

Not Applicable