

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000008637

**Entity Name:** VANGUARD HIGH SCHOOL BOOSTERS, INC.

**Current Principal Place of Business:**

7 NW 28 STREET  
OCALA, FL 34475

**FILED**  
**Mar 13, 2024**  
**Secretary of State**  
**1762964329CC**

**Current Mailing Address:**

2347 SE 17 STREET  
OCALA, FL 34471

**FEI Number: 82-2363780**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WHITSTON, HEATHER J  
2347 SE 17 STREET  
OCALA, FL 34471 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

**Officer/Director Detail :**

Title PD  
Name CANNON, ELIZABETH  
Address 1407 SE 5 STREET  
City-State-Zip: Ocala FL 34471

Title VPD  
Name FUQUA, LARRY  
Address 1751 NW 33 AVENUE  
City-State-Zip: Ocala FL 34475

Title TD  
Name GRAY, MERYDITH  
Address 42 BAHIA PASS  
City-State-Zip: Ocala FL 34472

Title D  
Name FARMER, EDWIN  
Address 7 NW 28 STREET  
City-State-Zip: Ocala FL 34475

Title SD  
Name LAMMENS, KATHY  
Address 4816 SE 10TH PLACE  
City-State-Zip: Ocala FL 34471

*I hereby 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 all other like empowered.*

**SIGNATURE: MERYDITH GRAY**

**TREASURER**

**03/13/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date