

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jul 28, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 708639**

1. Entity Name

RADIO CONTROL CLUB OF JACKSONVILLE, INC.



Principal Place of Business

4825 ISLAND DR  
JACKSONVILLE FL 32218  
US

Mailing Address

RADIO CONTROL OF JACKSONVILLE  
PO BOX 15203  
JACKSONVILLE FL 32239  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/06)

4. FEI Number

59-2873656

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FERRY, RICK SR.  
9412 GENNA TRACE TRAIL  
JACKSONVILLE FL 32257

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: VD  
NAME: HAYES, ED  
STREET ADDRESS: 2217 WESLEY ROAD  
CITY- ST- ZIP: YULEE FL 32097 ☐ Delete

TITLE: PD  
NAME: FERRY, RICK  
STREET ADDRESS: 9412 GENNA TRACE TRAIL  
CITY- ST- ZIP: JACKSONVILLE FL 32257 ☐ Delete

TITLE: SD  
NAME: BINGEN, GEORGE  
STREET ADDRESS: 4617 FULTON RD  
CITY- ST- ZIP: JACKSONVILLE FL 32225 ☐ Delete

TITLE: TD  
NAME: BEVILLE, LEWIS  
STREET ADDRESS: 3526 HARBISON ST  
CITY- ST- ZIP: JACKSONVILLE FL 32218 ☐ Delete

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS: 000000572564  
CITY- ST- ZIP: 07/28/06-80003-003 70.00

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

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NAME:  
STREET ADDRESS:  
CITY- ST- ZIP:

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:

*Richard P. Ferry, Jr.*

7-24-06

904-730-9619