

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

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # 727978	
1. Entity Name BOYS' CLUB OF COLUMBIA COUNTY, INC.	

Principal Place of Business PO BOX 1342 JONES RD LAKE CITY FL 32056-1342 US	Mailing Address PO BOX 1342 JONES RD LAKE CITY FL 32056-1342 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



1st MOORE CR2E037 (10/05)

4. FEI Number 59-1376908	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GRIFFIN, THOMAS A PINEMONT RD (252) WELLBORN FL 32094

7. Name and Address of New Registered Agent 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.

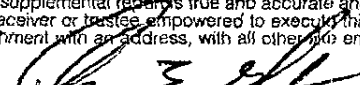
SIGNATURE  (NOTE: Registered Agent signatures required when filing this report) DATE **4/12/06**

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
PD GRIFFIN, THOMAS PINEMONT RD. (252) WELLBORN FL 32094	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
VD JONES, WANDA HIGHWAY 240 LAKE CITY FL 32055	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TD HILL, THEDA 805 COUNTRY CLUB ROAD LAKE CITY FL 32055	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
SD MARSEE, EDITH MARYLAND ST. LAKE CITY FL 32055	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
U00000525049 05/04/06-80015-017 70.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 persons empowered.

SIGNATURE  DATE **4/12/06 (38) 7534450**