

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732265

**FILED**  
**Feb 15, 2011**  
**Secretary of State**

**Entity Name:** BIG RED QUARTERBACK CLUB, INC.

**Current Principal Place of Business:**

NORTH FORT MYERS HIGH SCHOOL  
5000 ORANGE GROVE BLVD.  
N. FT. MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4129  
NORTH FORT MYERS, FL 33918

**New Mailing Address:**

**FEI Number:** 59-1702092

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARDNER, TIM  
2719 NW 8TH PL  
CAPE CORAL, FL 33993 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: P  
Name: GARDNER, TIM  
Address: 2719 NW 8TH PL  
City-St-Zip: CAPE CORAL, FL 33993

Title: VP  
Name: LEVERRETT, CHRIS  
Address: PO BOX 4129  
City-St-Zip: N FT MYERS, FL 33918

Title: T  
Name: WALTON, NICOLE  
Address: PO BOX 4129  
City-St-Zip: N FT MYERS, FL 33918

Title: S  
Name: HARPER, LORI  
Address: PO BOX 4129  
City-St-Zip: N FT MYERS, FL 33918

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: NICOLE WALTON

T

02/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date