

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768020

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** FLORIDA NATIONAL GUARD FOUNDATION, INC.

**Current Principal Place of Business:**

82 MARINE STREET  
SAINT AUGUSTINE, FL 320845039 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 1008  
ATTN: EXECUTIVE DIRECTOR  
SAINT AUGUSTINE, FL 320851008 US

**New Mailing Address:**

**FEI Number:** 59-2314251      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

COX, DEBRA A MAJ (R)  
82 MARINE STREET  
SAINT AUGUSTINE, FL 320845039 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: PD  
Name: CAPPS, RICHARD G BG (R)  
Address: 3591 LONE WOLF TRAIL  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: VPD  
Name: CRAIG, LISA G COL  
Address: 101 TINTO WAY  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: TD  
Name: THOMAS, THOMAS COL  
Address: 1728 CEDAR BAY ROAD  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: SD  
Name: RUFFNER, BENJAMIN CPT  
Address: 2723 WOOD STORKE TRAIL  
City-St-Zip: ORANGE PARK, FL 32073 US

Title: MGR  
Name: COX, DEBRA A MAJ (R)  
Address: 2801A USINA ROAD EXTENSION  
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: MB  
Name: EVANS, ELIZABETH MAJ  
Address: 11908 CENTERWOOD DRIVE NORTH  
City-St-Zip: JACKSONVILLE, FL 32246

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: DEBRA A. COX

MGR

01/03/2012

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

\_\_\_\_\_  
Date