

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001330

FILED
Feb 11, 2004
Secretary of State**Entity Name:** THE QUARTERBACK CLUB, INC.**Current Principal Place of Business:**72 HORSESHOE RD
MONTICELLO, FL 32344**New Principal Place of Business:**414 GAITHER DRIVE
TALLAHASSEE, FL 32305**Current Mailing Address:**PO BOX 6605
TALLAHASSEE, FL 32314**New Mailing Address:****FEI Number:** 59-3629491**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MURRAY, SONYA
72 HORSESHOE RD
MONTICELLO, FL 32344 US**Name and Address of New Registered Agent:**MURRAY, SONYA
414 GAITHER DRIVE
TALLAHASSEE, FL 32305 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: _____

02/11/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: MURRAY, SONYA
Address: 72 HORSESHOE RD
City-St-Zip: MONTICELLO, FL 32344

Title: PD () Delete
Name: MCROY, JAMES
Address: 72 HORSESHOE RD
City-St-Zip: MONTICELLO, FL 32344

Title: SD () Delete
Name: COLLEY, ERICO
Address: 72 HORSESHOE RD
City-St-Zip: MONTICELLO, FL 32344

Title: V () Delete
Name: DIXIE, SAM
Address: 72 HORSESHOE RD
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: MURRAY, SONYA
Address: 414 GAITHER DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: PD (X) Change () Addition
Name: MCROY, JAMES
Address: 1160 CORBY COURT EAST
City-St-Zip: TALLAHASSEE, FL 32317

Title: VD (X) Change () Addition
Name: HILL, FLOYD
Address: 414 GAITHER DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

Title: V (X) Change () Addition
Name: DIXIE, SAM
Address: 1105 TANNER DRIVE
City-St-Zip: TALLAHASSEE, FL 32305

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SONYA MURRAY

TD

02/11/2004

Electronic Signature of Signing Officer or Director

Date