


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000005668

1. Entity Name
NAVARRE HIGH SCHOOL BASEBALL BOOSTER CLUB, INC.



Principal Place of Business Mailing Address

8600 HIGH SCHOOL BLVD. **PO BOX 5922**
NAVARRE, FL 32566 **NAVARRE, FL 32566**

DO NOT WRITE IN THIS SPACE



01172006 No Chg-NP CR2E037 (11/05)

4. FEI Number Applied For
59-3670199 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TERRY, ROY
2002 PRICHARD POINT DR
NAVARRE, FL 32566

DO NOT WRITE IN THIS SPACE

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 signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SCULLEY, DEREK
STREET ADDRESS	2777 OLA BROXSON RD
CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	D
NAME	MUNDAY, KAY
STREET ADDRESS	6475 AVENIDA DE GALVEZ
CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	D
NAME	TERRY, ROY
STREET ADDRESS	2002 PRITCHARD POINT DR
CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	D
NAME	COX, DEENA
STREET ADDRESS	8350 ONICH DR
CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000424887
 02/18/06-80068-024 61.25

DO NOT WRITE IN THIS SPACE

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: *Kay S Munday*

2/6/06