2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2009
Secretary of State

DOCUMENT# N01000007224

Entity Name: ESCAMBIA HIGH SCHOOL QUARTERBACK CLUB, INC.

Current Principal Place of Business:

1310 N 65TH AVE
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

1310 N 65TH AVE
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: 59-3233962 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NICHOLS, JAMES
1310 N 65TH AVE
PENSACOLA, FL 32506 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:	D	( ) Delete
Name:	NICHOLS, JAMES	
Address:	1310 NORTH 65TH AVE	
City-St-Zip:	PENSACOLA, FL 32506	
Title:	P	( ) Delete
Name:	NESMITH, DONALD R	
Address:	318 PALOMINO CIR	
City-St-Zip:	PENSACOLA, FL 32506	
Title:	V	( ) Delete
Name:	TINDALL, JOHN	
Address:	3429 BOWKER DR	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	D	( ) Delete
Name:	FULLER, JEWEL	
Address:	208 CITRUS AVE	
City-St-Zip:	PENSACOLA, FL 32506	
Title:	V	( ) Delete
Name:	BOND, RONDA	
Address:	119 ELM ST	
City-St-Zip:	PENSACOLA, FL 32506	
Title:	S	( ) Delete
Name:	HALLFORD, TERESA	
Address:	1048 BREMEN AVE	
City-St-Zip:	PENSACOLA, FL 32507	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JEWEL FULLER D 07/07/2009

Electronic Signature of Signing Officer or Director — Date