## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000006244

Jan 12, 2009 Secretary of State

Entity Name: WEST FLORIDA HIGH SCHOOL OF ADVANCED TECHNOLOGY QUARTERBACK CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2400 LONGLEAF DRIVE PENSACOLA, FL 32526 **Current Mailing Address: New Mailing Address:** 2172 W. NINE MILE RD PENSACOLA, FL 32534 US FEI Number: 16-1620956 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ADAMS, KEVIN L ADAMS, KEVIN L 6600 FRANK REEDER RD 6600 FRANK REEDER RD PENSACOLA, FL 32526 US # 260 PENSACOLA, FL 32526 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: 01/12/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ADAMS, KEVIN L Name: Name: 6600 FRANK REEDER RD Address: Address: City-St-Zip: PENSACOLA, FL 32526 US City-St-Zip: Title: () Delete Title: () Change () Addition SEIBERT, HARRIETTE L Name: Name: Address: 512 DERRY DRIVE Address: City-St-Zip: CANTONMENT, FL 32533 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ERWIN, SCOTT M Name: FAXLANGER, JAMES J Name: 836 CHESAPEAKE TRAIL Address: Address: 4159 ERIKA CT. City-St-Zip: CANTONMENT, FL 32533 US City-St-Zip: PENSACOLA, FL 32526 US Title: VΡ ( ) Delete Title: () Change () Addition Name: PRINCE, JOHN C Name: 180 CHAMBERS AVE Address: Address: City-St-Zip: PENSACOLA, FL 32508 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SIMPKINS, BOSTON M MILLER, WILLIAM O Name: Name: 707 BAKER STREET 5832 DANDELION LN Address: Address: City-St-Zip: PENSACOLA, FL 32505 US City-St-Zip: PENSACOLA, FL 32526 US Title: () Delete Title: () Change () Addition ALLEN, SHERRI A Name: Name: Address: 320 FRISCO ROAD Address: PENSACOLA, FL 32507 US City-St-Zip: 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: KEVIN L. ADAMS P 01/12/2009