

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 11, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # N03000002494

1. Entity Name  
FERNANDINA BEACH HIGH SCHOOL NAVY ROTC  
PARENT BOOSTER CLUB, INC.



Principal Place of Business

435 CITRONA DR  
FERNANDINA BCH, FL 32034

Mailing Address

435 CITRONA DR  
FERNANDINA BCH, FL 32034



07072006 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

43-2047896

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

RUSHFORD, RONALD  
223 DUVAL RD  
FERNANDINA, FL 32034

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

|                |                            |
|----------------|----------------------------|
| TITLE          | PD                         |
| NAME           | JONES, RONALD              |
| STREET ADDRESS | 1236 SARA ROAD             |
| CITY-ST-ZIP    | YULEE, FL 32097            |
| TITLE          | VD                         |
| NAME           | PICKETT, JOE               |
| STREET ADDRESS | 175 TYSON ROAD             |
| CITY-ST-ZIP    | FERNANDINA BEACH, FL 32034 |
| TITLE          | TD                         |
| NAME           | BEACH, COLEEN              |
| STREET ADDRESS | 861 PARK VIEW PLE.         |
| CITY-ST-ZIP    | FERNANDINA BEACH, FL 32034 |
| TITLE          | SD                         |
| NAME           | RUSHFORD, RONALD           |
| STREET ADDRESS | 223 DUVAL ROAD             |
| CITY-ST-ZIP    | FERNANDINA, FL 32034       |
| TITLE          |                            |
| NAME           |                            |
| STREET ADDRESS |                            |
| CITY-ST-ZIP    |                            |
| TITLE          |                            |
| NAME           |                            |
| STREET ADDRESS |                            |
| CITY-ST-ZIP    |                            |

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #