

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010606

FILED  
Apr 18, 2008  
Secretary of State

**Entity Name:** WEST NASSAU WARRIOR FOOTBALL BOOSTER CLUB CORP.

**Current Principal Place of Business:**

1 WARRIOR DRIVE  
CALLAHAN, FL 32011

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1734  
CALLAHAN, FL 32011

**New Mailing Address:**

**FEI Number:** 76-0814996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BAKER, TAMMY L  
16022 PUSKITA TRAIL  
JACKSONVILLE, FL 32218 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: P ( ) Delete  
Name: HERN, RICHARD  
Address: 1148 SUNOWA SPRINGS TRAIL  
City-St-Zip: BRYCEVILLE, FL 32009

Title: V ( ) Delete  
Name: BAKER, TAMMY L  
Address: 16022 PUSKITA TRAIL  
City-St-Zip: JACKSONVILLE, FL 32218

Title: S ( ) Delete  
Name: GILL, BARBARA  
Address: 54117 JESSICA PL.  
City-St-Zip: CALLAHAN, FL 32011

Title: T ( ) Delete  
Name: LINDSEY, MARY B  
Address: P.O. BOX 1734  
City-St-Zip: CALLAHAN, FL 32011

**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: T (X) Change ( ) Addition  
Name: PARKER, PAMELA A  
Address: 1415 COUNTRYSIDE ACRES  
City-St-Zip: BRYCEVILLE, FL 32009

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: PAMELA A. PARKER

T

04/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date