## 2007 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT** DOCUMENT # N06000012473

THE ROOSEVELT MILITARY ACADEMY ROUGH RIDER ASSOCIATION, INC.



Principal Place of Business 5941 PARKWALK DR., NR. 813

STREET ADDRESS

CITY-ST-ZIP

Mailing Address

5941 PARKWALK DR., NR. 813

BOYNTON BEACH, FL 33437  BOYNTON BEACH, FL 33437  2. Principal Place of Business - No P.O. Box # 3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02132007 Chg	I-NP	CR2E03	7 (12/06)	
City & State			City & State			4. FEI Number 20 7 4 2 9   Applied For Not Applicable				
Zip Country			· · · · · · · · · · · · · · · · · · ·	Cou	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name and Address of Current	Registered	Agent			7. Name and Addre	ss of New Re			<u> </u>
FEITLER, GERALD 5941 PARKWALK DR., NR. 813 BOYNTON BEACH, FL 33437					Name Street Address (P.O. Box Number is Not Acceptable)					
ja. S					City			FL	Zip Cod	e
SIGNATURE	tions of registered agent.  Signature, typed or printed name of registered agent	t and title if appli	cable. (NOT	E: Registere	J Agent signature req	uired when reinstating)		DATE		
	Filing Fee is \$61.25 Due by May 1, 2007			mpaign F Contributi		\$5.00 May Be Added to Fees	Make check payable to Florida Department of State			
10.	OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHANGES	TO OFFICER	S AND DIR	ECTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ** GWYNNE, JACK 1850 PAR RUN PACIFIC, MO 63069		☐ Delete				·		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WEAVER, GARY 202 CAHOKI CT. SPARLAND, IL 61565	. , , , ,	☐ Delete		4	.,,			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VAGI, B. MICHAEL 13725 FM2728N TERRELL, TX 75161		☐ Delete		3				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FEITLER, GERALD 5941 PARKWALK DR., NR. 813 BOYNTON BEACH, FL 33437		□ Delete	4		, , , , , , , , , , , , , , , , , , , ,			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						☐ Change	☐ Addition
TITLE NAME			☐ Delete	TITLE			•,		☐ Change	Addition

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

**FILED** Feb 22, 2007 8:00 am Secretary of State

02-22-2007 90009 027 \*\*\*\*70.00

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