

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15930

FILED
Jan 07, 2004
Secretary of State

Entity Name: THE NATIONAL GUARD OFFICERS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

82 MARINE STREET
P.O. BOX 3446
ST. AUGUSTINE, FL 320850446

New Principal Place of Business:

Current Mailing Address:

82 MARINE STREET
P.O. BOX 3446
ST. AUGUSTINE, FL 320850446

New Mailing Address:

FEI Number: 59-2628455 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

H & R BLOCK
9965-26 SAN JOSE BLVD
JACKSONVILLE, FL 32257 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: S () Delete
Name: FRANTZ, DONNA
Address: P.O. BOX 1008
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: D () Delete
Name: GOLDINGER, JOHN
Address: P O BOX 3446
City-St-Zip: ST AUGUSTINE, FL 32085

Title: D () Delete
Name: KINGHORN, JESSE
Address: 82 MARINE ST
City-St-Zip: ST AUGUSTINE, FL

Title: P () Delete
Name: FLEMING, MICHAEL
Address: P.O. BOX 3446
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: D () Delete
Name: PAUL, MARY E.
Address: POST OFFICE BOX 1716
City-St-Zip: ST. AUGUSTINE, FL 32085

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BUTLER, HANK
Address: P O BOX 3446
City-St-Zip: ST AUGUSTINE, FL 32085

Title: P (X) Change () Addition
Name: BALSUS, JOSEPH
Address: 82 MARINE ST
City-St-Zip: ST AUGUSTINE, FL

Title: D (X) Change () Addition
Name: BROWN, VAUGHN
Address: P.O. BOX 3446
City-St-Zip: ST. AUGUSTINE, FL 32085

Title: D (X) Change () Addition
Name: PAUL, MARY E.
Address: POST OFFICE 3446
City-St-Zip: ST. AUGUSTINE, FL 32085

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARY E. PAUL

D

01/07/2004

Electronic Signature of Signing Officer or Director

Date