

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N23309 (0)

1. Corporation Name

THE MILTON HIGH SCHOOL QUARTERBACK CLUB, INC.

Principal Place of Business

Mailing Address

P.O. BOX 171
MILTON FL 32570
US

P.O. BOX 171
MILTON FL 32570
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/03/1987

3a. Date of Last Report

03/23/1994

4. FEI Number

59-2863786

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$0.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Milton, Florida

26 P.O. Box 171

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 City & State

28 Milton, FL

24 Zip

Country

25 32570

South Ross

29 Zip

Country

30 32570

South Ross

9. Name and Address of Current Registered Agent

LEE, JAMES HAROLD
5125 HAMILTON BRIDGE RD.
MILTON FL 32570

10. Name and Address of New Registered Agent

81 Name

William Blocker

82 Street Address (P.O. Box Number is Not Acceptable)

6530 Munson Highway

83

84 City

Milton

85

FL

86 Zip Code

32570

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

William Wayne Blocker, President

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

(NOTE: Registered Agent signature required when reappointing)

3/16/95

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
LEE, JAMES H.
5463 HAMILTON BRIDGE RD.
MILTON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
CARROLL, WILLIAM E.
6038 WILLARD NORRIS RD.
MILTON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
BLANKS, ANGIE
5909 SAVANNAH DR.
MILTON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
GRANT, MARY
5732 BRONCO PLACE
MILTON FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
President - D
William Blocker
6530 Munson Highway
Milton, FL 32570

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
Vice President
James B. Brock
402 Sanders Street
Milton, FL 32570

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
Treasurer - D
Mary G. Jordan
105 Combs Street
Milton, FL 32570

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
Secretary - D
Leigh Joyner
5424 Brandon Street
Milton, FL 32570

☒ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary G. Jordan / Mary G. Jordan

March 17, 1995 904-623-3630

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #