FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 26 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N42332 (9)

1. Corporation Name
MANDARIN HIGH SCHOOL MUSTANGS BOOSTER CLUB, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
4831 GREENLAND RD JACKSONVILLE FL 32258 US	PO BOX 56802 JACKSONVILLE FL 32241-6802 US

3. Date Incorporated or Qualified: 03/04/1991
3a. Date of Last Report: 02/22/1994
4. FEI Number: 59-[redacted] 3052770 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** 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 § 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

MCDONALD, LARRY
12569 DONRAVEN TRL
JACKSONVILLE FL 32223

10. Name and Address of New Registered Agent

81 Name: DEBBIE IGOU
82 Street Address (P.O. Box Number is Not Acceptable): 11953 OLDFIELD PT
83
84 City: JACKSONVILLE FL 85 Zip Code: 32223

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: Debra J. Igou (DEBRA J. IGOU) President 4/12/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	MCDONALD, LARRY	1.2 NAME	DEBBIE IGOU	
STREET ADDRESS	12569 DUNRAVEN TRL	1.3 STREET ADDRESS	11953 OLDFIELD PT	
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	JACKSONVILLE, FL. 32223	
TITLE	DV	2.1 TITLE		☐ Change ☐ Addition
NAME	EDGEMON, JIM	2.2 NAME		
STREET ADDRESS	2006 HIBERNIA CT	2.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP		
TITLE	DV	3.1 TITLE	DV	☒ Change ☐ Addition
NAME	MORGON, TOM	3.2 NAME	GREG BLINKHORN	
STREET ADDRESS	3725 TUMBLING OAKS DR	3.3 STREET ADDRESS	11740 WORDSWORTH CT.	
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	JACKSONVILLE, FL 32223	
TITLE	D	4.1 TITLE	D	☐ Change ☒ Addition
NAME	SOUTHWORTH, LARRY	4.2 NAME	BILL MCKINNEY	
STREET ADDRESS	9504 PICKWICK DR.	4.3 STREET ADDRESS	12697 CACHET DR	
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE	DS	5.1 TITLE	DS	☒ Change ☐ Addition
NAME	IGON, DEBBIE	5.2 NAME	LINDA STOWELL	
STREET ADDRESS	11953 OLDFIELD PT	5.3 STREET ADDRESS	5180 SIESTA DEL RIO DR.	
CITY-ST-ZIP	JACKSONVILLE FL	5.4 CITY-ST-ZIP	JACKSONVILLE, FL 32258	
TITLE	DT	6.1 TITLE		☐ Change ☐ Addition
NAME	ANDERSON, JEFF	6.2 NAME		
STREET ADDRESS	12225 ALADDIN RD	6.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	6.4 CITY-ST-ZIP		

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 119.07(3)(k), 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: Jeffrey P. Anderson (JEFFREY P. ANDERSON) TRS 4/12/95 904 268 0891
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004515

N42332

Mandarin High School
MUSTANGS
Booster Club, Inc.

95

BOARD OF DIRECTORS (cont.)

7.) DIR.
JOHN ANDERSON
10146 OAKISLE RD. W
JACKSONVILLE FL 32257

8.) DIR.
TOMMY LEE
9735 OLD ST. AUGUSTINE RD
JACKSONVILLE, FL 32257

9.) DIR.
JOE LEE
11820 CATHLENE CT.
JACKSONVILLE, FL. 32223

10.) DIR.
TOM MORGAN
3452 N. RIDE CT.
JACKSONVILLE, FL 32223

11.) DIR.
PHIL SULLIVAN
3560 OLDFIELD LAKE CT.
JACKSONVILLE, FL. 32223

12.) DIR.
JAN WILLIAMS
3631 MOSSWOOD CT.
JACKSONVILLE, FL. 32223

P. O. Box 56802 • Jacksonville, Florida 32241-6802