

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
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.

Principal Place of Business

Mailing Address

4831 GREENLAND RD
JACKSONVILLE FL 32256
US

PO BOX 56802
JACKSONVILLE FL 32241-6802
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **03/04/1991** 3a. Date of Last Report **02/22/1994**

4. FEI Number **59-0000000 3052770** 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 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCDONALD, LARRY
12569 DUNRAVEN TRL
JACKSONVILLE FL 32223

81 Name **DEBBIE IGOU**
82 Street Address (P.O. Box Number is Not Acceptable)
11953 OLDFIELD PT

83 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

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

(NOTE: Registered Agent signature required when registering)

(DEBBIE J. IGOU) President

4/12/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP**
NAME **MCDONALD, LARRY**
STREET ADDRESS **12569 DUNRAVEN TRL**
CITY-ST-ZIP **JACKSONVILLE FL**

1.1 TITLE **DP** ☒ Change ☐ Addition
1.2 NAME **DEBBIE IGOU**
1.3 STREET ADDRESS **11953 OLDFIELD PT**
1.4 CITY-ST-ZIP **JACKSONVILLE, FL. 32223**

TITLE **DV**
NAME **EDGEMON, JIM**
STREET ADDRESS **2006 HIBERNIA CT**
CITY-ST-ZIP **JACKSONVILLE FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **DV**
NAME **MORGON, TOM**
STREET ADDRESS **3725 TUMBLING OAKS DR**
CITY-ST-ZIP **JACKSONVILLE FL**

3.1 TITLE **DV** ☒ Change ☐ Addition
3.2 NAME **GREG BLINKHORN**
3.3 STREET ADDRESS **11740 WORDSWORTH CT.**
3.4 CITY-ST-ZIP **JACKSONVILLE, FL 32223**

TITLE **D**
NAME **SOUTHWORTH, LARRY**
STREET ADDRESS **9504 PICKWICK DR.**
CITY-ST-ZIP **JACKSONVILLE FL**

4.1 TITLE **D** ☐ Change ☒ Addition
4.2 NAME **BILL MCKINNEY**
4.3 STREET ADDRESS **12697 CACHET DR**
4.4 CITY-ST-ZIP **JACKSONVILLE FL 32223**

TITLE **DS**
NAME **IGOU, DEBBIE**
STREET ADDRESS **11953 OLDFIELD PT**
CITY-ST-ZIP **JACKSONVILLE FL**

5.1 TITLE **DS** ☒ Change ☐ Addition
5.2 NAME **LINDA STOWELL**
5.3 STREET ADDRESS **5180 SIESTA DEL RIO DR.**
5.4 CITY-ST-ZIP **JACKSONVILLE, FL 32258**

TITLE **DT**
NAME **ANDERSON, JEFF**
STREET ADDRESS **12225 ALADDIN RD**
CITY-ST-ZIP **JACKSONVILLE FL**

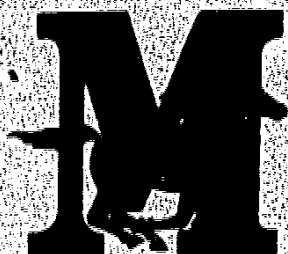
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 110.07(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 017, 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

904 268 0691



Mandarin High School
MUSTANGS
Booster Club, Inc.

N42332

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. 6

JACKSONVILLE, FL 32223

11.)

DIR.

PHIL SULLIVAN

3560 OLDFIELD LAKE CT.

JACKSONVILLE, FL, 32223

12.)

DIR.

JAH WILLIAMS

3631 MOSSWOOD CT.

JACKSONVILLE, FL. 32223