

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42332

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** MANDARIN HIGH SCHOOL MUSTANGS BOOSTER CLUB, INC.

**Current Principal Place of Business:**

4831 GREENLAND RD  
JACKSONVILLE, FL 32258 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 56802  
JACKSONVILLE, FL 322416802 US

**New Mailing Address:**

**FEI Number:** 59-3052770

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARKEY, PATTI  
12521 ATTRILL ROAD  
JACKSONVILLE, FL 32258 US

**Name and Address of New Registered Agent:**

LEAVITT, DEBRA M  
4305 RUSTLING LEAF LANE  
JACKSONVILLE, FL 32258 US

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: DEBRA M LEAVITT

04/26/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: BARKEY, PATTI  
Address: 12521 ATTRILL ROAD  
City-St-Zip: JACKSONVILLE, FL 32258

Title: DP ( ) Delete  
Name: CHURCH, JANET  
Address: 4433 MILLSTONE COURT  
City-St-Zip: JACKSONVILLE, FL 32257

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DT (X) Change ( ) Addition  
Name: LEAVITT, DEBRA M  
Address: 4305 RUSLTING LEAF LANE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: DP (X) Change ( ) Addition  
Name: AMMONS, JODY  
Address: 11578 ALEXIS FOREST DRIVE  
City-St-Zip: JACKSONVILLE, FL 32258

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DEBRA M LEAVITT

DT

04/26/2006

Electronic Signature of Signing Officer or Director

Date