NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001029

1. Entity Name
AUBURNDALE NAVAL JUNIOR ROTC BOOSTER CLUB, INC.

FILED Apr 24, 2002 8:00 am Secretary of State

04-24-2002 90378 006 ****61.25

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	DO NOT WRITE	IN THIS SI	PACE				
Principal Place of Business 3. Mailing Address					1		
1 Bloohound Trail		1851 Orangewood Avenue S.W.					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number		Applied For	
Auburndale, FL		Winter Haven, FL		59-3488368		Not Applicable	
Zip 33823	Country USA	Zip 33880	Country USA	•	5. Certificate of Status Desired	□ \$8.75 Fee Rec	Additiona!
	5021	33000	034		7. Name and Address of Current R		Junou
			N:	amo	gham, George T		
DO NOT WRITE				Street Address (P.O. Box Number is Not Acceptable)			
IN THIS SPACE							
IN THIS SPACE				1 Bloodhound Trail City Auburndale FL Zip Code 33823			
SIGNATURE	Signature, typed or printed name of registered agent a	nd utle if applicable. (Next)	Registered Age	t signifure rosyfred	when deirstating)	1-12-() 2
	FEE-IS-S61-25 Initial or Amended UBR	9. Election Carr Trust Fund C		cing		e Check Payal partment∤of∖Si	
10.	OFFICERS AND DIR	ECTORS		·			
TITLE .	PRESIDENT Marie Jackson		TITLE NAME				
				ORESS			
CITY-ST-ZIP	Auburndale, FL 33823		CITY-ST-ZI	Р	•	•	
LILE	VICE PRESIDENT		TITLE				
NAME STREET ADDRESS	Ron Mount 215 So. Ilakee Avenue		NAME				
CITY-ST-ZIP	Lake Alfred, FL 33850))	STREET ADD		•		and the season
TITLE	SECRETARY	J	TITLE				1. 人名英格兰 10 10 10 10 10 10 10 10 10 10 10 10 10
NAME	Becky Coleman		NAME				
STREET ADDRESS	4820 Holton Road		STREET ADD	RESS	DO NOT	VDITE	
	Auburndare, FL 33823		CITY-SF-ZI	ST-ZIP: DO NOT WR		AHILE	
TITLE NAME	CO-TREASURER Karen B. Bailey				IN THIS SPACE		
STREET ADDRESS	11051 0		NAME STREET ADD	bree	IN THIS STACE		
CITY-ST-ZIP	Winter Haven, FL 3388	0-6518	CITY-ST-ZI	· 1	,		
NTLE	CO-TREASURER		TITLE				
NAME	Brenda Smith		"NAME"		·		
STREET ADDRESS	135 Anarece Avenue		STREET ADD	RESS			
CITY-ST-ZIP	Auburndale, FL 33823		CITY-ST-Z#		6		3 104A 4
TITLE			TITLE -				

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP