

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90117 025 ****61.25

DOCUMENT # N96000004610

1. Entity Name

**NORTH FLORIDA MILITARY OFFICIALS ASSOCIATION, IN
C.**



Principal Place of Business

**FLEET RESERVE CLUB OF JACKSONVILLE
5391 COLLINS ROAD
JACKSONVILLE FL 32244**

Mailing Address

**C/O 2933 W 4TH ST
JACKSONVILLE FL 32254-420
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3051939**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VANDERCAR, ALAN
2862 RUSSELL OAK DR.
GREEN COVE SPRINGS FL 32043**

7. Name and Address of New Registered Agent

Name **Jesse Beach**

Street Address (P.O. Box Number is Not Acceptable)
7799 Enderby Ave. E.

City **Jacksonville**

FL

Zip Code
32244

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

Jesse Beach
(NOTE: Registered Agent signature required when reinstating)

2/11/03
DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SAULS, AUBREY P 1761 PAPAYA DR. WEST ORANGE PARK FL 32073 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, KENT 1273 LE BLANC RD. GREEN COVE SPRINGS FL 32043 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BOOKER, DOUGLAS D 2933 WEST FOURTH ST. JACKSONVILLE FL 32254-2420 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MULLEN, DENNIS 2250 SANDY CT ORANGE PARK FL 32073 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VANDERCAR, ALAN 2862 RUSSELL OAK DR GREEN COVE SPRINGS FL 32043 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACKSON, GENE 5041 ANDREWS ST JACKSONVILLE FL 32254 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MULLEN, DENNIS 2250 SANDY CT. ORANGE PARK FL 32073 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEACH, Jesse 7799 Enderby Ave E Jacksonville FL 32244 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Douglas D Booker
Douglas D Booker *2/11/03 (904) 783 8948*

CR2E037 (10/02)