

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005279

FILED
Aug 21, 2006
Secretary of State

Entity Name: LINCOLN NJROTC BOOSTERS INC.

Current Principal Place of Business:

3838 TROJAN TRAIL
TALLAHASSEE, FL 32311

New Principal Place of Business:

Current Mailing Address:

PO BOX 12901
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 59-3407865 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FOWINKLE, CHARLES T
4068 MCLAUGHLIN
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ASZTOLAS, PHYLLIS
Address: 5013 CENTENNIAL OAK DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD () Delete
Name: KIPKER, ROBERT
Address: 2333 BRAEBURN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32309

Title: OPS () Delete
Name: METZ, LYNNE
Address: 1310 AVONDALE WAY
City-St-Zip: TALLAHASSEE, FL 32317

Title: SEC () Delete
Name: DAHLKE, RAMONA
Address: 3228 WEST BALDWIN DR
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: METZ, LYNNE
Address: 1310 AVONDALE WAY
City-St-Zip: TALLAHASSEE, FL 32317

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: RAMIREZ, ROSIE
Address: 3258 ROBINHOOD ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: OPS (X) Change () Addition
Name: TRACY, CANTER
Address: 4007 CHAIRES CROSS ROAD
City-St-Zip: TALLAHASSEE, FL 32317

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: ROBERT KIPKER

TD

08/21/2006

Electronic Signature of Signing Officer or Director

Date