

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 13, 2006 8:00 am**  
**Secretary of State**

02-13-2006 90025 022 \*\*\*\*61.25

<b>DOCUMENT # N98000001610</b>					
<b>1. Entity Name</b> THE GEORGE JENKINS HIGH SCHOOL CHORUS BOOSTER CLUB, INC.					
<b>Principal Place of Business</b> 6000 LAKE LAND HIGHLANDS ROAD LAKE LAND, FL 33813			<b>Mailing Address</b> 6000 LAKE LAND HIGHLANDS ROAD LAKE LAND, FL 33813		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 59-3497538	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
FISHER, ROLAND 6000 LAKE LAND HIGHLANDS ROAD LAKE LAND, FL 33813			Name Street Address (P.O. Box Number is Not Acceptable) City		
			FL Zip Code		
<b>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.</b>					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, SUE 2853 MERIDAN POINT LANE LAKE LAND, FL 33813		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cindy Miller 6655 Chadron Ct. Lakeland, FL 33813	
	<input checked="" type="checkbox"/> Delete			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARTIN, ROBERT 2859 MERIDAN POINT LANE LAKE LAND, FL 33813		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	
	<input checked="" type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HILLYARD, JERRI 5932 LAUREL OAK DRIVE LAKE LAND, FL 33811		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dee Lee 2695 Highridge Dr. Lakeland, FL 33813	
	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAYMAN, DEBRA 1355 LONGOAK DR. N LAKE LAND, FL 338112146		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	
	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	G SMITH, KIM E 6707 HIGHLANDS CREEK BLVD LAKE LAND, FL 33813		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	
	<input checked="" type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	
	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	

**12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:**

*Jeri Hillyard, President*

**(863) 648-3566**

40012905



01292006 Chg-NP CR2E037 (11/05)

**4. FEI Number**  
59-3497538

Applied For  
Not Applicable

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

FISHER, ROLAND  
6000 LAKE LAND HIGHLANDS ROAD  
LAKE LAND, FL 33813

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL Zip Code

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

**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  
D  
MARTIN, SUE  
2853 MERIDAN POINT LANE  
LAKE LAND, FL 33813

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MARTIN, ROBERT  
2859 MERIDAN POINT LANE  
LAKE LAND, FL 33813

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HILLYARD, JERRI  
5932 LAUREL OAK DRIVE  
LAKE LAND, FL 33811

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
HAYMAN, DEBRA  
1355 LONGOAK DR. N  
LAKE LAND, FL 338112146

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
G  
SMITH, KIM E  
6707 HIGHLANDS CREEK BLVD  
LAKE LAND, FL 33813

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D

☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Cindy Miller  
6655 Chadron Ct.  
Lakeland, FL 33813

☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Dee Lee  
2695 Highridge Dr.  
Lakeland, FL 33813

☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D

☐ Change ☐ Addition