

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000005684

**Entity Name:** BELL BULLDOG QUARTERBACK CLUB, INC.

**Current Principal Place of Business:**

BELL HIGH SCHOOL  
930 NORTH MAIN STREET  
BELL, FL 32619

**Current Mailing Address:**

POST OFFICE BOX 12  
BELL, FL 32619 US

**FEI Number:** 20-4891311

**Certificate of Status Desired:** Yes

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

HOUSTON, BELINDA  
6470 NW 6TH PL  
BELL, FL 32619 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title T  
Name AGUILAR, MYRNA  
Address 6377 NW 18TH TERRACE  
City-State-Zip: BELL FL 32619

Title VP  
Name LEFFLER, ROBERT  
Address 3190 NW 50TH STREET  
City-State-Zip: BELL FL 32619

Title P  
Name HOUSTON, BELINDA  
Address 6470 NW 6TH PL  
City-State-Zip: BELL FL 32619

Title S  
Name FRIEND, DANIELLE  
Address 7443 NE 25TH LANE  
City-State-Zip: HIGH SPRINGS FL 32643

*I hereby 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 all other like empowered.*

**SIGNATURE:** MYRNA AGUILAR

**TREASURY**

**04/24/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date