

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759077

FILED
Mar 10, 2009
Secretary of State

Entity Name: JEFFERSON PINES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2848 PROCTOR RD.
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

2848 PROCTOR RD.
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 59-2265459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER MANAGEMENT SERVICES INC.
2848 PROCTOR RD.
SARASOTA, FL 34231 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: SD () Delete
Name: PERNIGOTTI, LINDA
Address: 635 IN. JEFFERSON AVE.
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: STENDER, RICHARD
Address: 625 NORTH JEFFERSON AVE
City-St-Zip: SARASOTA, FL 34237

Title: TD () Delete
Name: DOHM, KAREN
Address: 757 N JEFFERSON AVE
City-St-Zip: SARASOTA, FL 34237

Title: VPD () Delete
Name: TONKO, SHIRLEY
Address: 721 N. JEFFERSON AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: PD () Delete
Name: FIPPINGER, JOHN
Address: 721 N. JEFFERSON AVENUE
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: TAYLOR, VALERIE
Address: 635 NORTH JEFFERSON AVE.
City-St-Zip: SARASOTA, FL 34237

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

Title: D (X) Change () Addition
Name: DOLAN, JOHN
Address: 719 NORTH JEFFERSON AVE
City-St-Zip: SARASOTA, FL 34237

Title: VPD (X) Change () Addition
Name: TONKO, SHIRLEY
Address: 721 NORTH JEFFERSON AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: PD (X) Change () Addition
Name: FIPPINGER, JOHN
Address: 721 NORTH JEFFERSON AVENUE
City-St-Zip: SARASOTA, FL 34237

I hereby certify that the information supplied with this filing does not qualify 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: JOHN FIPPINGER

Electronic Signature of Signing Officer or Director

PRES

03/10/2009

Date