

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04958

FILED
Feb 18, 2009
Secretary of State

Entity Name: JEFFERSON COUNTY HUMANE SOCIETY, INC.

Current Principal Place of Business:

1250 MAMIE SCOTT DR.
MONTICELLO, FL 32344 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 559
MONTICELLO, FL 323450559 US

New Mailing Address:

FEI Number: 59-2507088 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMURRAY, MARGARET
440 W WASHINGTON ST
MONTICELLO, FL 32344 US

Name and Address of New Registered Agent:

MCMURRAY, MARGARET
290 WEST WASHINGTON ST
SUITE 1
MONTICELLO, FL 32344 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

02/18/2009

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: MCMURRAY, MARGARET
Address: 440 W WASHINGTON ST
City-St-Zip: MONTICELLO, FL 32344

Title: PD () Delete
Name: CARSWELL, CAROLINE
Address: P.O. BOX 508
City-St-Zip: MONTICELLO, FL 32345

Title: D () Delete
Name: CARSWELL, GEORGE
Address: P.O. BOX 508
City-St-Zip: MONTICELLO, FL 32345

Title: S (X) Delete
Name: KESSLER, TERESA
Address: 1715 CASA BIANCA
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: MCMURRAY, MARGARET
Address: 290 WEST WASHINGTON ST
City-St-Zip: MONTICELLO, FL 32344

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

Title: S (X) Change () Addition
Name: KESSLER, TERESA
Address: 1715 CASA BIANCA
City-St-Zip: MONTICELLO, FL 32344

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

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: MARGARET MCMURRAY

Electronic Signature of Signing Officer or Director

T

02/18/2009

Date