

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04958

FILED  
Jan 31, 2011  
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 954  
MONTICELLO, FL 323450559 US

**New Mailing Address:**

P.O. BOX 954  
MONTICELLO, FL 32345 US

**FEI Number:** 59-2507088

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NATIVIO, JEANETTE  
P.O BOX 954  
MONTICELLO, FL 32345 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: T  
Name: NATIVIO, JEANETTE  
Address: P.O BOX 954  
City-St-Zip: MONTICELLO, FL 32345

Title: PD  
Name: KESSLER, MARK  
Address: P.O. BOX 954  
City-St-Zip: MONTICELLO, FL 32345

Title: S  
Name: KESSLER, TERESA  
Address: P.O. BOX 954  
City-St-Zip: MONTICELLO, FL 32345

Title: VP  
Name: KING, BONNIE  
Address: P.O. BOX 954  
City-St-Zip: MONTICELLO, FL 32345

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: TERESA KESSLER

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01/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date