

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010616

FILED
Jun 06, 2009
Secretary of State

Entity Name: JEFFERSON COUNTY COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

435 EAST WASHINGTON STREET
MONTICELLO, FL 32344

New Principal Place of Business:

680 W. HALPIN ROAD
MONTICELLO, FL 32344

Current Mailing Address:

P.O. BOX 906
MONTICELLO, FL 32345

New Mailing Address:

FEI Number: 26-1440952 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CABAGNOT, ROCKY M ESQ.
2119 DELTA BOULEVARD
TALLAHASSEE, FL 32303 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: P () Delete
Name: BURTON, BRENT
Address: 435 E. WASHINGTON STREET
City-St-Zip: MONTICELLO, FL 32344

Title: VP () Delete
Name: BARNHART, CETTA
Address: 680 W. HALPIN ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: S/T () Delete
Name: CARTER, WANDA E
Address: 2663 FAIRMONT LANE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: MARKIEWICZ, BARBARA
Address: 1031 RAINEY RUN
City-St-Zip: MONTICELLO, FL 32344

Title: D (X) Delete
Name: HALL, GENE
Address: 935 BRANCH STREET
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARNHART, CETTA
Address: 680 HALPIN ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: VP (X) Change () Addition
Name: MARKIEWICZ, BARBARA
Address: 1031 RAINEY RUN
City-St-Zip: MONTICELLO, FL 32344

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

Title: D (X) Change () Addition
Name: HAMILTON, CAROLYN
Address: 660 E. POPLAR STREET
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: WANDA E. CARTER

S/T

06/06/2009

Electronic Signature of Signing Officer or Director

Date