

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011354

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** JEFFERSON COUNTY MERCHANTS ASSOCIATION, INC

**Current Principal Place of Business:**

398 WILLOW POND ROAD  
MONTICELLO, FL 32344

**New Principal Place of Business:**

**Current Mailing Address:**

398 WILLOW POND ROAD  
MONTICELLO, FL 32344

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

SIMPSON, CLYDE B  
398 WILLOW POND ROAD  
MONTICELLO, FL 32344    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: D  
Name: SIMPSON, CLYDE B  
Address: 217 WILLOW POND ROAD  
City-St-Zip: MONTICELLO, FL 32344

Title: D  
Name: BESHEARS, FRED  
Address: 52 NACCOOSA ROAD  
City-St-Zip: MONTICELLO, FL 32344

Title: D  
Name: HANKS, CARL  
Address: 375 N. SUNSET  
City-St-Zip: MONTICELLO, FL 32344

Title: D  
Name: KUNDRA, ARUN  
Address: 2716 GAMBLE RD  
City-St-Zip: MONTICELLO, FL 32344

Title: D  
Name: LOVE, THOMAS W  
Address: 845 S. WAUKEENAH STREET  
City-St-Zip: MONTICELLO, FL 32344

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: CLYDE B. SIMPSON

D

05/01/2012

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

\_\_\_\_\_  
Date