

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22625

FILED  
Apr 12, 2010  
Secretary of State

**Entity Name:** JEFFERSON COUNTY MINISTERS CONFERENCE CORPORATION

**Current Principal Place of Business:**

2928 ASHVILLE RD  
MONTICELLO, FL 32344 US

**New Principal Place of Business:**

**Current Mailing Address:**

857 PINEWOODS RD  
MONTICELLO, FL 32344 US

**New Mailing Address:**

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

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

BROOKINS, JIMMY  
2928 ASHVILLE RD  
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: P  
Name: BROOKINS, JIMMY  
Address: 2925 ASHVILLE RD  
City-St-Zip: MONTICELLO, FL 32344 US

Title: VP  
Name: RANSOM, BEN  
Address: 857 PINEY WOODS RD  
City-St-Zip: MONTICELLO, FL 32344 US

Title: S  
Name: REDMON, JAMES  
Address: 382 E GLENN RD  
City-St-Zip: MONTICELLO, FL 32344 US

Title: VP  
Name: BIVENS, ALBERT S JR  
Address: 101 S JEFF STREET  
City-St-Zip: MONTICELLO, FL 32344 US

Title: T  
Name: THOMAS, HERBERT  
Address: 85 JUBILEE LN  
City-St-Zip: MONTICELLO, FL 32344 US

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: JIMMY BROOKINS

P

04/12/2010

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

\_\_\_\_\_  
Date