2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 28, 2000 08:00 AM DOCUMENT # N9500001567 1. Entity Name **Secretary of State** JACKSON COUNTY DEVELOPMENT COUNCIL, INC. Principal Place of Business Mailing Address 2840 JEFFERSON STREET PO BOX 920 PO BOX 920 MARIANNA FL MARIANNA FL 32448 32447 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3306144 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAKER 4431 LAFAYETTE ST. Street Address (P.O. Box Number is Not Acceptable) MARIANNA \mathbf{FL} 32446 Zip Code 8. 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. 04/28/2000 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) ญ็หญ่≥าเก็ ก็เรียกได้ FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delate TITLE X Addition NAME BURDESHAW NAME ABBIE STREET ADDRESS STPEET ADDRESS 5400 CLIFF STREET CITY-ST-ZIP CITY-ST-ZIP GRACEVILLE FL32440 TITLE ☐ Delete D ☐ Change XI Addition NAME NAME BRITT GENE STREET ADDRESS STREET ADDRESS 5000 WILMINGTON COURT CITY-ST-ZIP CITY-ST-ZIP CAMPBELLTON 32426 TITLE ☐ Delete TITLE ☐ Change **X** Addition NAME NAME BRADWELL ANNIE STREET ADDRESS STREET ADDRESS 3921 SYLVANIA PLANTATION ROAD CITY-ST-ZIP CITY-ST-ZIP GREENWOOD \mathbf{FL} 32443 TITLE ☐ Delete TITLE XI Change ☐ Addition NAME ALTER JOHN HENDERSON RILEY **JREVEREN** STREET ADDRESS 5298 HATCHER RD STREET ADDRESS 4490 JACKSON ROAD CITY-ST-ZIP BASCOM 324239122 COTTONDALE CITY-ST-ZIP 32431 TITLE ☐ Delete TITLE X Change ☐ Addition NAME IINDERWOOD MIKE WHITEHURST NAR/F STAN STREET ADDRESS 5348 CLIFF ST STREET ADDRESS 4222 HICKORY LANE CITY-ST-ZIP GRACEVILLE 32440 CITY-ST-ZIP MARIANNA FL. 32448 TITLE ☐ Delete TITLE VP ☐ Addition XI Change NAME **FUR** PAT STREET ADDRESS 5310 BLUE SPRINGS RD STREET ADDRESS 5310 BLUE SPRINGS RD

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MARIANNA

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^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ROTOLO, PHIL, DIRECTOR

4351 LAFAYETTE STREET MARIANNA, FL 32448

RIMES, WILLIAM S., DIRECTOR

5282 PEANUT ROAD GRACEVILLE, FL **32440**

DONALDSON, HAROLD, DIRECTOR

2889 GREEN STREET MARIANNA, FL 32446

CUTSHAW, MARK, DIRECTOR

2825 PENNSYLVANIA AVENUE MARIANNA, FL 32448-4004

YOUNG, RUSSELL, DIRECTOR 2284 BERETTA LANE

COTTONDALE, FL 32431

UNDERWOOD, MIKE, DIRECTOR 5348 CLIFF STREET

GRACEVILLE, FL 32440

MORGAN, CHUCK, DIRECTOR 4384 ANGELA DRIVE

MARIANNA, FL 32446

MERRITT, NORMA, DIRECTOR 2669 HIGHWAY 73 SOUTH

MARIANNA, FL 32448

MCLEAN, MAVIS, DIRECTOR 4182G LONE OAK LANE

GREENWOOD, FL 32443

LOCKEY, CHUCK, DIRECTOR 4374 RIVER FOREST ROAD

MARIANNA, FL 32446