

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759077

**FILED**  
**Feb 28, 2019**  
**Secretary of State**  
**5309222922CC**

**Entity Name:** JEFFERSON PINES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1950 60TH PLACE EAST  
BRADENTON, FL 34203

**Current Mailing Address:**

PO BOX 51732  
SARASOTA, FL 34232 US

**FEI Number:** 59-2265459

**Certificate of Status Desired:** No

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

DUBIN ENTERPRISES, INC  
6715 GRAND ESTUARY TRAIL  
BRADENTON, FL 34212 US

*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

**Officer/Director Detail :**

Title SD  
Name TAYLOR, VALERIE  
Address 635 NORTH JEFFERSON AVE.  
City-State-Zip: SARASOTA FL 34237

Title D  
Name STEPHENS, MICHAEL  
Address 769 N. JEFFERSON AVENUE  
City-State-Zip: SARASOTA FL 34237

Title D, PRESIDENT  
Name LARSEN, TIMOTHY  
Address 615 NORTH JEFFERSON AVE  
City-State-Zip: SARASOTA FL 34237

Title TD, TREASURER  
Name TONKO, SHIRLEY  
Address 721 NORTH JEFFERSON AVENUE  
City-State-Zip: SARASOTA FL 34237

Title VPD  
Name CARLSON, JULIE  
Address 651 NORTH JEFFERSON AVENUE  
City-State-Zip: SARASOTA FL 34237

*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:** TIMOTHY LARSEN

**PRESIDENT**

**02/28/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date