

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759077

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

**FILED**  
**Apr 01, 2023**  
**Secretary of State**  
**5281369972CC**

**Current Principal Place of Business:**

C/O MITCHELL ASSOCIATION MANAGEMENT GROUP  
909 CATTLEMEN RD  
SARASOTA, FL 34232

**Current Mailing Address:**

C/O MITCHELL ASSOCIATION MANAGEMENT GROUP  
909 CATTLEMEN RD  
SARASOTA, FL 34232 US

**FEI Number: 59-2265459**

**Certificate of Status Desired: No**

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

MITCHELL, PAULA  
MITCHELL ASSOCIATION MANAGEMENT GROUP  
909 CATTLEMEN RD  
SARASOTA, FL 34232 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: PAULA MITCHELL**

**04/01/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BELANGER, RACHELLE  
Address        C/O MITCHELL ASSOCIATION  
                  MANAGEMENT GROUP  
                  909 CATTLEMEN RD  
City-State-Zip: SARASOTA FL 34232

Title            TREASURER  
Name            THOMAS, PIERRE  
Address        C/O MITCHELL ASSOCIATION  
                  MANAGEMENT GROUP  
                  909 CATTLEMEN RD  
City-State-Zip: SARASOTA FL 34232

Title            SECRETARY  
Name            TEICHER, SUZANNE  
Address        C/O MITCHELL ASSOCIATION  
                  MANAGEMENT GROUP  
                  909 CATTLEMEN RD  
City-State-Zip: SARASOTA FL 34232

Title            DIRECTOR  
Name            LABONE, FRANK  
Address        C/O MITCHELL ASSOCIATION  
                  MANAGEMENT GROUP  
                  909 CATTLEMEN RD  
City-State-Zip: SARASOTA FL 34232

Title            DIRECTOR  
Name            SHANNON, DONALD  
Address        C/O MITCHELL ASSOCIATION  
                  MANAGEMENT GROUP  
                  909 CATTLEMEN RD  
City-State-Zip: SARASOTA FL 34232

Title            MANAGING AGENT  
Name            MITCHELL, PAULA  
Address        C/O MITCHELL ASSOCIATION  
                  MANAGEMENT GROUP  
                  909 CATTLEMEN RD  
City-State-Zip: SARASOTA FL 34232

*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: PAULA MITCHELL**

**MANAGING AGENT**

**04/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date