

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 764089

1. Entity Name

JACKSON COUNTY CHAPTER #3486 OF AMERICAN ASSOCIA

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90082 005 ****61.25

Principal Place of Business

4376 KELLY AVE.
MARIANNA FL 32446
US

Mailing Address

P.O. BOX 724
MARIANNA FL 32447

001010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4060 Thomasville Lane

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Marianna, FL

City & State

4. FEI Number

59-3741820

Applied For

Not Applicable

Zip

Country

32448

US

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEWEESE, JOANNE-MARIE
4376 KELLY AVE.
MARIANNA FL 32446

7. Name and Address of New Registered Agent

Name

Vlieg, Bern

Street Address (P.O. Box Number is Not Acceptable)

4060 Thomasville Lane

City

Marianna

FL

Zip Code

32448

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.

SIGNATURE Bern Vlieg, President

4-11-2000

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	DEWESSE, JOANNE-MARIE	
STREET ADDRESS	4376 KELLY AVE.	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	COX, HELEN	
STREET ADDRESS	2667 TURNER ROAD	
CITY-ST-ZIP	MARIANNA FL 32448	
TITLE	DV	<input checked="" type="checkbox"/> Delete
NAME	HORNE, GLADIS	
STREET ADDRESS	4664 SHANKLE DRIVE	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	BROWN, BLANCHE	
STREET ADDRESS	2562 NEW SALEM ROAD	
CITY-ST-ZIP	MARIANNA FL 32448	
TITLE	D	<input type="checkbox"/> Delete
NAME	SANSON, JUANITA	
STREET ADDRESS	3284 CAVERNS RD	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	BEVIS, FRANCES	
STREET ADDRESS	3610 OLD U.S. ROAD	
CITY-ST-ZIP	MARIANNA FL 32446	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vlieg, Bern	
STREET ADDRESS	4060 Thomasville Lane	
CITY-ST-ZIP	Marianna, FL 32448	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Barris, Gloria	
STREET ADDRESS	4116 Park Place Rd.	
CITY-ST-ZIP	Marianna, FL 32446	
TITLE	Dewese, Joanne-Marie	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4376 Kelly Avenue	
STREET ADDRESS	Marianna, FL 32446	
CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Deese, Mary Francis	
STREET ADDRESS	3391 Peanut Road	
CITY-ST-ZIP	Cottondale, FL 32431	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Brown, Blanche	
STREET ADDRESS	2562 New Salem Rd	
CITY-ST-ZIP	Marianna, FL 32448	

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.

SIGNATURE: Blanche Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-00 850 579 4919

Date

Daytime Phone #

CR2E037 (9/99)