

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90183 006 ****69.00

DOCUMENT # 765734

1. Entity Name

JACKSON COUNTY CHRISTMAS FUND, INC.



Principal Place of Business

P.O. BOX 99
MARIANNA FL 32446-0099

Mailing Address

P.O. BOX 99
MARIANNA FL 32446-0099

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2230007**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

SOUTHWELL, SPRING
4862 GEORGIA RD
BASCOM FL 32423

7. Name and Address of New Registered Agent

Name **Laura Trejo**
Street Address (P.O. Box Number is Not Acceptable)
4452 Clinton St.
City **Marianna** FL Zip Code **32446**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VP	<input type="checkbox"/> Delete
NAME	BRACK, BOBBIE	
STREET ADDRESS	4452 CLINTON STREET	
CITY-ST-ZIP	MARIANNA FL 32446	
TITLE	D	<input type="checkbox"/> Delete
NAME	BROXTON, CALLIE	
STREET ADDRESS	1044 PATTERSON	
CITY-ST-ZIP	GRACEVILLE FL 32440	
TITLE	T	<input type="checkbox"/> Delete
NAME	SOUTHWELL, SPRING	
STREET ADDRESS	4862 GEORGIA RD	
CITY-ST-ZIP	BASCOM FL 32423	
TITLE	D	<input type="checkbox"/> Delete
NAME	SWEAZY, SAM	
STREET ADDRESS	2869 ST CLAIR ST	
CITY-ST-ZIP	MARIANNA FL 32448	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	AL-KASSAR, LAURETTA	
STREET ADDRESS	4452 E. CLINTON STREET	
CITY-ST-ZIP	MARIANNA FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BLAIR, DEBBIE	
STREET ADDRESS	5065 JEANETTE DRIVE	
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	Bobbie Brock	
STREET ADDRESS	4452 Clinton St. PO Box 86	
CITY-ST-ZIP	Marianna, FL 32446	
TITLE	V.P	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Vonelle Heathrice	
STREET ADDRESS	4440 Putnam St.	
CITY-ST-ZIP	Marianna, FL 32446	
TITLE	S.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kim Hale	
STREET ADDRESS	4440 Putnam St.	
CITY-ST-ZIP	Marianna, FL 32446	
TITLE	T.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Laura Trejo	
STREET ADDRESS	4452 Clinton St.	
CITY-ST-ZIP	Marianna, FL 32446	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Cheryl Chesteen	
STREET ADDRESS	2958 Cherokee St.	
CITY-ST-ZIP	Marianna, FL 32446	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Wendy Herring	
STREET ADDRESS	4403 Jackson St	
CITY-ST-ZIP	Marianna, FL 32446	

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:

SOUTHWELL, SPRING

4/30/03

209-2352

CR2E037 (10/02)

ATTACHMENT
10100345
Doc # 765734

D
Spring Southwell
4862 Georgia Rd
Bascom, FL 32423

(change)

D
Michelle Green
4452 Clinton Street
Marianna, FL 32446

(change)

D
Terry Laramour
2830 Wynn Street
Marianna, FL 32446

(addition)

D
Sam Sweazy
2869 St. Clair Street
Marianna, FL 32447

D
Cordelia Baker
3553 Baker Creek Rd.
Marianna, FL 32446

D
Jane Springer
2290 Bethlehem Rd
Cottondale, FL 32431