

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N02003	
1. Entity Name JEFFERSON SQUARE COMMUNITY ASSOCIATION, INC.	

Principal Place of Business 1826 WATERBURY LANE P.O. BOX 953 ORANGE PARK FL 32067-0953	Mailing Address 1826 WATERBURY LANE P.O. BOX 953 ORANGE PARK FL 32067-0953
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE	CR2E037 (10/07)
4. FEI Number 59-2412013	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
EDDY, PAUL F. 1826 WATERBURY LANE ORANGE PARK FL 32003

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
(Signature, typed or printed name of registered agent and title if not applicable) (NOTE: Registered Agent signature required when re-stating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to: Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	STD EDDY, VIRGINIA F. 1826 WATERBURY LANE ORANGE PARK FL ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD PATRICK, BONNE 96 SEASIDE CAPERS ROAD SAINT AUGUSTINE FL 32084 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD EDDY, PAUL 1826 WATERBURY LANE ORANGE PARK FL 32003 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition U000000937615 05/27/08-80058-015 70.00
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Virginia Eddy, Treasurer* 4/24/08 904-219-6097