## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02003

FILED Apr 06, 2009 Secretary of State

Entity Name: JEFFERSON SQUARE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1826 WATERBURY LANE 1826 WATERBURY LANE

P.O. BOX 953 ORANGE PARK, FL 320670953 US

ORANGE PARK, FL 320670953

**Current Mailing Address: New Mailing Address:** 

1826 WATERBURY LANE 1826 WATERBURY LANE

P.O. BOX 953 ORANGE PARK, FL 320670953 US ORANGE PARK, FL 320670953

FEI Number: 59-2412013 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

EDDY, PAUL F EDDY, PAUL F MR 1826 WATERBURY LANE 1826 WATERBURY LANE

ORANGE PARK, FL 32003 US ORANGE PARK, FL 32003 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: PAUL F. EDDY 04/06/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

STD () Delete (X) Change ( ) Addition EDDY, VIRGINIA F. EDDY, VIRGINIA F Name: Name:

1826 WATERBURY LANE Address: 1826 WATERBURY LANE Address: City-St-Zip: ORANGE PARK, FL City-St-Zip: ORANGE PARK, FL 32003 US

(X) Change ( ) Addition Title: VPD ( ) Delete Title: VPD

PATRICK, BONNE Name: PALIN, GEORGIA Name:

Address: 96 SEASIDE CAPERS ROAD Address: 645 KILCHURN DR. City-St-Zip: SAINT AUGUSTINE, FL 32084 City-St-Zip: ORANGE PARK, FL 32073 US

Title: PD () Delete Title: PD (X) Change ( ) Addition

EDDY, PAUL EDDY, PAUL Name: Name:

1826 WATERBURY LANE Address: Address: 1826 WATERBURY LANE

City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: ORANGE PARK, FL 32003 US

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: INMAN, WALTER MR Address: Address: P.O. BOX 1244

City-St-Zip: City-St-Zip: ORANGE PARK, FL 320671244 US

Title: () Delete Title: ( ) Change (X) Addition

INMAN, ANNA MARIE MRS Name: Name:

P.O. BOX 1244 Address: Address:

ORANGE PARK, FL 320671244 US City-St-Zip: City-St-Zip:

Title: () Delete Title: ( ) Change (X) Addition

PATRICK, BRIAN MR Name: Name: Address: Address: 96 SEASIDE CAPERS RD ST. AUGUSTINE, FL 32084 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VIRGINIA F. EDDY STD 04/06/2009