

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000012046

**FILED**  
**Jan 30, 2010**  
**Secretary of State**

**Entity Name:** J. ADKINS FAMILY FOUNDATION, INC.

**Current Principal Place of Business:**

55 MARKET STREET APT. 202  
APALACHICOLA, FL 32320

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 968  
APALACHICOLA, FL 32329

**New Mailing Address:**

**FEI Number:** 20-4232952

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADKINS, JANET  
55 MARKET STREET APT. 202  
APALACHICOLA, FL 32320 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** ADKINS, JANET E  
**Address:** 55 MARKET STREET APT. 202  
**City-St-Zip:** APALACHICOLA, FL 32320

**Title:** D  
**Name:** ADKINS, GORDON K  
**Address:** 32 AVENUE D SUITE 201  
**City-St-Zip:** APALACHICOLA, FL 32320

**Title:** D  
**Name:** ADKINS, JASON P  
**Address:** 32 AVENUE D SUITE 201  
**City-St-Zip:** APALACHICOLA, FL 32320

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:** JANET ADKINS

RA

01/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date