

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

DOCUMENT# N07000007250

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

**Entity Name:** JENKS CROSSING OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1123 CUTCHENS ROAD  
SOUTHPORT, FL 32409

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1719  
LYNN HAVEN, FL 32444

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PEADEN, MICHAEL D  
1123 CUTCHENS ROAD  
SOUTHPORT, FL 32409 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: PEADEN, MICHAEL D  
Address: 1123 CUTCHENS ROAD  
City-St-Zip: SOUTHPORT, FL 32409

Title: D  
Name: KING, LANNY C  
Address: 2519 WILLO LANE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: D  
Name: KING, JAN  
Address: 2519 WILLO LANE  
City-St-Zip: LYNN HAVEN, FL 32444

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: MICHAEL D. PEADEN

MGMR

03/30/2010

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

\_\_\_\_\_  
Date