

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003672

FILED
Mar 05, 2009
Secretary of State

Entity Name: JACKSON COUNTY ASSOCIATION OF VOLUNTEER FIRE DEPARTMENTS INC.

Current Principal Place of Business:

4956 LAUDERDALE LANE
BASCOM, FL 23423

New Principal Place of Business:

1310 RESCUE DR
ALFORD, FL 32420

Current Mailing Address:

7380 NW PORTER GRADE RD.
ALTHA, FL 32421

New Mailing Address:

FEI Number: 59-3216488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIDDLE, CLARK E
4956 LAUDERDALE LANE
BASCOM, FL 23423 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: PD () Delete
Name: RIDDLE, CLARK E
Address: 4956 LAUDERDALE LANE
City-St-Zip: BASCOM, FL 23423

Title: ST () Delete
Name: MYRHAMMER, ROLF
Address: 7380 NW PORTER GRADE RD.
City-St-Zip: ALTHA, FL 32421

Title: V () Delete
Name: SINGER, STAN
Address: 2131 SHADOW BAY DR.
City-St-Zip: GRAND RIDGE, FL 32442

Title: D () Delete
Name: DOMINGUEZ, RICHARD
Address: 2588 FRONT ST.
City-St-Zip: COTTONDALE, FL 32431

Title: D () Delete
Name: MERCER, CHRIS
Address: 5881 BLUE SPRINGS RD.
City-St-Zip: GREENWOOD, FL 32443

Title: D () Delete
Name: LAREN, DON M
Address: 1310 RESCUE DR.
City-St-Zip: ALFORD, FL 32420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MACLAREN, DONALD
Address: 1310 RESCUE DRIVE
City-St-Zip: ALFORD, FL 32420

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RIDDLE, CLARK E
Address: 4956 LAUDERDALE LANE
City-St-Zip: BASCOM, FL 32423

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: CLARK E. RIDDLE

D

03/05/2009

Electronic Signature of Signing Officer or Director

Date