

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003672

FILED  
Apr 01, 2010  
Secretary of State

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

**Current Principal Place of Business:**

1310 RESCUE DR  
ALFORD, FL 32420

**New Principal Place of Business:**

**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 32423 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  
Name: MACLAREN, DONALD  
Address: 1310 RESCUE DRIVE  
City-St-Zip: ALFORD, FL 32420

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

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

Title: D  
Name: TAYLOR, DONNY  
Address: 5309 HWY 231  
City-St-Zip: CAMPBELLTON, FL 32420

Title: D  
Name: YONGUE, BRYAN  
Address: 214 ALFORD RD.  
City-St-Zip: COTTONDALE, FL 32431

Title: D  
Name: RIDDLE, CLARK E  
Address: 4956 LAUDERDALE LANE  
City-St-Zip: BASCOM, FL 32423

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: ROLF MYRHAMMAR

ST

04/01/2010

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

\_\_\_\_\_  
Date