

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28297

FILED
Jun 25, 2009
Secretary of State

Entity Name: LAKE JACKSON VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

5329 TOWER ROAD
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

5329 TOWER ROAD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-2916529 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JONES, JOAN
4370 SHERBORNE RD
TALLAHASSEE, FL 32303 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 () Delete
Name: GARCIA, JENNIFER
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: T () Delete
Name: JONES, JOAN
Address: 4370 SHERBORNE RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: D () Delete
Name: INGRAM, DANIEL
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: S () Delete
Name: MCKEEN, ASHLEY
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: P () Delete
Name: COSGROVE, CLIFF
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: V (X) Delete
Name: HUGHES, ANGIE
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: COSGROVE, CLIFF
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: T/P (X) Change () Addition
Name: JONES, JOAN
Address: 4370 SHERBORNE RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: D (X) Change () Addition
Name: HUGHES, ANTONIO
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: S (X) Change () Addition
Name: EMBLETON, JESSI
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: D (X) Change () Addition
Name: HUGHES, ANGIE
Address: 5329 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
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: JOAN JONES

PRES

06/25/2009

Electronic Signature of Signing Officer or Director

Date