

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29148

FILED
Apr 01, 2009
Secretary of State

Entity Name: THOMAS JEFFERSON CIVIC CLUB

Current Principal Place of Business:

8237 NEVADA STREET
C/O DELORES H. PACETTI
JACKSONVILLE, FL 32220 US

New Principal Place of Business:

8237 NEVADA STREET
C/O JOHNNY LAMMONS
JACKSONVILLE, FL 32220 US

Current Mailing Address:

JOHNNY LAMMONS
8237 NEVADA ST
JACKSONVILLE, FL 322202651 US

New Mailing Address:

JOHNNY LAMMONS
325 WARTON STREET
JACKSONVILLE, FL 322201961 US

FEI Number: 59-0306247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMMONS, JOHNNY
325 WARTON ST.
JACKSONVILLE, FL 32220 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: VP () Delete
Name: SINGLETARY, FRED
Address: 9071 RAINBOW LN
City-St-Zip: JACKSONVILLE, FL 32220

Title: P () Delete
Name: LAMMONS, JOHNNY
Address: 325 WARTON ST.
City-St-Zip: JACKSONVILLE, FL 32220

Title: T () Delete
Name: PACETTI, DELORES H
Address: 8888 OLD GAINESVILLE ROAD
City-St-Zip: JACKSONVILLE, FL 32221

Title: TR () Delete
Name: FURMAN, HERBERT
Address: 8051 LAKELAND ST
City-St-Zip: JACKSONVILLE, FL 32221

Title: S () Delete
Name: FURMAN, MELISSA
Address: 8051 LAKELAND ST
City-St-Zip: JACKSONVILLE, FL 32221

Title: TR () Delete
Name: PACETTI, OLA MAE
Address: 8926 OLD GAINESVILLE ROAD
City-St-Zip: JACKSONVILLE, FL 32221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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Address:
City-St-Zip:

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

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: JOHNNY LAMMONS

P

04/01/2009

Electronic Signature of Signing Officer or Director

Date