

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30127

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: JERNIGAN'S LANDING, INC.

**Current Principal Place of Business:**

200 SW 80 ST  
OCALA, FL 34476

**New Principal Place of Business:**

**Current Mailing Address:**

200 SW 80 ST  
OCALA, FL 34476

**New Mailing Address:**

FEI Number: 59-2935109

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TARTER, WILLIAM  
200 SW 80 STREET  
OCALA, FL 34476 US

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

TARTER, WILLIAM L  
200 SW 80 STREET  
OCALA, FL 34476 US

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: WILLIAM L. TARTER

04/01/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: TURNER, LESLIE C  
Address: 104 SW 1ST AVE.  
City-St-Zip: Ocala, FL 34471

Title: D ( ) Delete  
Name: CHRISTOFF, JOHN P.,  
Address: 953 SE FORT KING STREET  
City-St-Zip: Ocala, FL

Title: D ( ) Delete  
Name: TARTER, WILLIAM L.,  
Address: 200 SW 80 STREET  
City-St-Zip: Ocala, FL 34476

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: TURNER, LESLIE C  
Address: 1759 NE JACKSONVILLE ROAD  
City-St-Zip: Ocala, FL 34470

Title: D (X) Change ( ) Addition  
Name: CHRISTOFF, JOHN P.,  
Address: 3621 SW 7TH AVENUE ROAD  
City-St-Zip: Ocala, FL 34474 US

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: WILLIAM L. TARTER

PRES

04/01/2009

Electronic Signature of Signing Officer or Director

Date