## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

## Apr 28, 2006 8:00 am Secretary of State DOCUMENT # N93000001943 1. Entity Name 04-28-2006 90153 039 \*\*\*\*70.00 EAST JACKSON COUNTY ECONOMIC DEVELOPMENT COUNCIL, INC. Principal Place of Business Mailing Address 8292 HIGHWAY 90 EAST P.O. BOX 1072 SNEADS FL 32460 SNEADS FL 32460 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-3179915 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BYRD, RHONDA K Street Address (P.O. Box Number is Not Acceptable) 8292 HIGHWAY 90 EAST SNEADS FL 32460 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typiid or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD VD TITLE Defete TITLE Change ☐ Addition BYRD, RHONDA Byrd, Rhonda NAME NAME 8292 HIGHWAY 90 EAST STREET ADDRESS 8292 Highway 90 East STREET ADDRESS SNEADS FL 32460 CITY-ST-ZIP CITY - ST - ZIP Sneads, FL 32460 Delete TITLE TITLE ☐ Channe X Addition HILL, EDD NAME NAME Daniels, Phyllis 7336 HWY 90 STREET ADDRESS STREET ADDRESS 6932 Messer Rd GRAND RIDGE FL 32442 CITY-ST-ZIP CITY-S1-ZIP Sneads, FL 32460 DST TITLE ☐ Detete TITLE Change ☐ Addition NAME GRICE, HELEN NAME Grice, Helen 2071 Gay Ave. STREET ADDRESS STREET ADDRESS 2071 GAY AVENUE CITY-ST-7IP SNEADS FL 32460 CITY-ST-ZIP Sneads. FL TITLE ☐ Delete TITLE [ ] Change ☐ Addition NAME MONEYHAM, J.R. STREET ADDRESS PO DRAWER 180 STREET ADDRESS GRAND RIDGE FL 32442 CITY - ST - ZIP CITY-ST-ZIP X Delete TITLE TITLE ☐ Change ☐ Addition PARMER, JAMES C NAME NAME PO BOX 767 STREET ADDRESS STREET ADDRESS SNEADS FL 32640 CITY-ST-ZIP CITY-ST-ZIP X Change TITLE ☐ Delete TITLE ☐ Addition HIRT, HOMER NAME Hirt, Homer 2054 DAIRY ROAD STREET ADDRESS STREET ADDRESS 2054 Dairy Road 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**FILED**