

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003669

FILED
Jan 26, 2012
Secretary of State

Entity Name: JEFFERSON LONGRIFLES, INC.

Current Principal Place of Business:

2409 MEXIA AVENUE
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 16348
TALLAHASSEE, FL 32316

New Mailing Address:

P.O. BOX 21348
TALLAHASSEE, FL 32316

FEI Number: 59-3263986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDERSON, DAVE
2409 MEXIA AVE
TALLAHASSEE, FL 32304 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: P
Name: WINANS, JAN
Address: 2945 SPINAKE CT
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP
Name: WHITT, ROGER
Address: 8021 ARCHER CIRCLE
City-St-Zip: TALLAHASSEE, FL 32309

Title: T
Name: ASHE, DUANE A
Address: 1402 ATTAPULGUS-WHIGHAM RD
City-St-Zip: WHIGHAM, GA 32398

Title: S
Name: DOD, RONALD
Address: 8725 MINNOW CREEK RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: WILSON, WILLIAM
Address: 6974 TOWER RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: D
Name: POWELL, CHARLES
Address: 76 BARNES RD
City-St-Zip: MONTICELLO, FL 32344

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: DUANE A ASHE

T

01/26/2012

Electronic Signature of Signing Officer or Director

Date