

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004788

FILED
May 18, 2004
Secretary of State

Entity Name: THE LEON COUNTY JUVENILE JUSTICE COUNCIL, INC.

Current Principal Place of Business:

C/O RICHARD SWAINE
P.O. BOX 11251
TALLAHASSEE, FL 32327

New Principal Place of Business:

Current Mailing Address:

C/O RICHARD SWAINE
P.O. BOX 11251
TALLAHASSEE, FL 32327

New Mailing Address:

FEI Number: 59-3270226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWAINE, RICHARD
521 OLD MAGNOLIA RD.
CRAWFORDVILLE, FL 32327 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: DC () Delete
Name: DANIELS, NANCY
Address: 301 S MONROE STREET RM 401
City-St-Zip: TALLAHASSEE, FL 32301

Title: DT () Delete
Name: SWAINE, RICHARD
Address: P.O. BOX 11251
City-St-Zip: TALLAHASSEE, FL 32302

Title: DVC () Delete
Name: HALL, CALVIN
Address: 2601 GUNN STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: DS () Delete
Name: MITCHELL, MIAISHA
Address: 8416 LULA LANE
City-St-Zip: TALLAHASSEE, FL 32308

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
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD SWAINE

MR

05/18/2004

Electronic Signature of Signing Officer or Director

Date