

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

DOCUMENT # N95000000276

1. Entity Name
CJC SERVICES CORPORATION



Principal Place of Business
**1851 SOUTH MONROE ST
TALLAHASSEE, FL 30301**

Mailing Address
**PO BOX 248
DAYTON, OH 45409**

05-11-2007 90042 001 *****8.75
05-11-2007 90042 002 *****61.25

DO NOT WRITE IN THIS SPACE



04122007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-3291517

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**THOMAS, SEMMEAL REV.
233 MT. ZION CHURCH ROAD
HAVANA, FL 32333**

**DO NOT WRITE
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WHITESIDE-CURRY, C.
STREET ADDRESS	1851 S. MONROE ST
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	VP
NAME	CURRY, CRYST'N J
STREET ADDRESS	1851 S. MONROE ST
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	D
NAME	SCOTT, A.L.
STREET ADDRESS	2200 W. HARRISON ST 328 W. Harrison Street
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	D
NAME	BRICE, D.L.
STREET ADDRESS	5180 FIELDGREEN CROSSING
CITY-ST-ZIP	STONE MOUNTAIN, GA 30088
TITLE	D
NAME	WHITESIDE, CHARLES
STREET ADDRESS	7540 N. WOLCOTT AVENUE
CITY-ST-ZIP	CHICAGO, IL 60626
TITLE	D
NAME	UPCHURCH-SCOTT, TERRI
STREET ADDRESS	2305 SPOONWOOD DRIVE
CITY-ST-ZIP	TALLAHASSEE, FL 32303

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: **Whiteside-Curry, President/CEO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/25/2007

Date

(850) 212-7287

Daytime Phone #