

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0017560

DOCUMENT # N95000000276

1. Entity Name

CJC SERVICES CORPORATION



FILED

03 SEP 10 AM 9:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1350 E-4 TENNESSEE STREET
SUITE 274
TALLAHASSEE FL 32308

Mailing Address

1350 E-4 TENNESSEE STREET
SUITE 274
TALLAHASSEE FL 32308

2. Principal Place of Business

1020 E. Lafayette Street.

Suite, Apt. #, etc.

205A

City & State

Tallahassee, FL

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

Zip

Country

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.
580 N MAGNOLIA ST.
MONTICELLO FL 32344

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
233 Mt. Zion Church Road

City
Havana

FL

Zip Code
32333

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

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME WHITESIDE-CURRY, C.
STREET ADDRESS 1000 SEMINOLE DRIVE
CITY-ST-ZIP TALLAHASSEE FL 32301 ☐ Delete

TITLE VP
NAME CURRY, CRYSTIN J
STREET ADDRESS 1000 SEMINOLE DRIVE
CITY-ST-ZIP TALLAHASSEE FL 32301 ☐ Delete

TITLE D
NAME SCOTT, A.L.
STREET ADDRESS 425 OSCEOLA STREET
CITY-ST-ZIP TALLAHASSEE FL 32301 ☐ Delete

TITLE D
NAME BRICE, D.L.
STREET ADDRESS 5180 FIELDGREEN CROSSING
CITY-ST-ZIP STONE MOUNTAIN GA 30088 ☐ Delete

TITLE D
NAME WHITESIDE, CHARLES
STREET ADDRESS 7540 N. WOLCOTT AVENUE
CITY-ST-ZIP CHICAGO IL 60626 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME Upchurch-Scott, Terri
STREET ADDRESS 2305 Spoonwood Drive
CITY-ST-ZIP Tallahassee FL 32303 ☐ Change ☒ Addition

TITLE
NAME 500023279435
STREET ADDRESS 09/23/03--01047--001
CITY-ST-ZIP **61.25 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

9/10/03

(850) 942-6188

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Desktop Phone #

CR2E037 (4/03)