2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002102

Entity Name: CLAY COUNTY JUVENILE JUSTICE COUNCIL, INC.

FILED Jan 12, 2004 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
|---|--|---------------------------------|-----------|---|---|--------------------------------------|--|
| | "H ORANGE S" OVE SPRINGS | | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| P.O. BOX 548 GREEN COVE SPRINGS, FL 32043 | | | | P.O. BOX 548 ATTN: JANET SMITH FOX GREEN COVE SPRINGS, FL 32043 | | | |
| FEI Number: 59-0331606 FEI Number Applied For () | | | FEI Nur | FEI Number Not Applicable () Certificate of Status Desired () | | | |
| Name and | Address of C | urrent Registered Agent: | | Name and | Address of | New Registered Agent: | |
| | ET SMITH 'H ORANGE AV OVE SPRINGS | | | | | | |
| | named entity s e of Florida. | ubmits this statement for the p | ourpose c | of changing i | ts registered | office or registered agent, or both, | |
| SIGNATUR | RE: | | | | | | |
| | Electron | c Signature of Registered Age | ent | | | Date | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | D () Delete COLLINS, TIM PO BOX 1362 GREEN COVE SPRINGS, FL 32043 | | | Title: Name: Address: City-St-Zip: | D (X) Change () Addition MUELLER, DEBBIE PO BOX 1362 GREEN COVE SPRINGS, FL 32043 | | |
| Title: Name: Address: City-St-Zip: | DC () Delete MARTIN, NORMA V 23 SOUTH GREEN ST. : GREEN COVE SPRINGS, FL 32043 | | | Title: Name: Address: City-St-Zip: | DC (X) Change () Addition LATNEY, HERB 3292 COUNTY ROAD 220 MIDDLEBURG, FL 32068 | | |
| Title: Name: Address: City-St-Zip: | FOX, JANET SN 901 NORTH OR | | | Title: Name: Address: City-St-Zip: | | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | S () PROCTOR, MAI 85 DEBARRY A' ORANGE PARK | /E., 3074 | | Title: Name: Address: City-St-Zip: | GODFREY, E 1000 SHEAR | | |
| Title: Name: Address: City-St-Zip: | HALL, SUSANNE 800 WALNUT S | | | Title: Name: Address: City-St-Zip: | | () Change () Addition | |

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: JANET SMITH FOX DT 01/12/2004