2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2004 8:00 am
Secretary of State
03-05-2004 90006 037 ****61.25

DOCUMENT # N96000004165

1. Entity Name
BIG BEND JOBS AND EDUCATION COUNCIL, INC.

Principal Place of Business	Mailing Address
325 JOHN KNOX RD BUILDING F-140 TALLAHASSEE, FL 32303	325 JOHN KNOX RD BUILDING F-140 TALLAHASSEE, FL 32303

03032004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3633062 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

POPE, J.WYATT
325 JOHN KNOX RD
BUILDING F-140
TALLAHASSEE, FL 32303

7. Name and Address of New Registered Agent

Name Bodine, Robert
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ 3/3/04
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, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CT THORNTON, GLENDA PO BOX 508 TALLAHASSEE, FL 32302	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary (ST) Bill Colledge 217 North Monroe St. Tallahassee, FL. 32301	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCT BARKLEY, ROBERT PO BOX 1726 QUINCY, FL 32353	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Board Chair (CT)	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST SMITH, DEBRA PO BOX 189 QUINCY, FL 32353	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer (TT)	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TT ROUTA, ROBERT PO BOX 1600 CRAWFORDVILLE, FL 32326	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice Chair (VCT)	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO BODINE, ROBERT 325 JOHN KNOX RD BLDG. F-140 TALLAHASSEE, FL 32303	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chief Executive Officer	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO WYATT, POPE J 325 JOHN KNOX RD BLDG F-140 TALLAHASSEE, FL 32303	☒ Delete	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: _____ 3/3/04 (850)414-6085 (210)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #