

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002042

FILED
Jan 16, 2008
Secretary of State

Entity Name: J.B. CASH FOUNDATION, INC.

Current Principal Place of Business:

730 SE 28TH LANE
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4556
PRINCETON, FL 33092

New Mailing Address:

FEI Number: 65-0764220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, SANDRA T
830 NORTH KROME AVENUE
HOMESTEAD, FL 33090 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: PD () Delete
Name: LAWLER, GLORIA C
Address: 730 S.E. 28TH LANE
City-St-Zip: HOMESTEAD, FL 33033

Title: DVST () Delete
Name: LAWLER, ELWARD ROY III
Address: 131 SHORT CREEK ROAD
City-St-Zip: DECATUR, TE 37322

Title: D () Delete
Name: LAWLER FLYNN, JANICE K
Address: 15804 S. W. 82 COURT
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: LAWLER, ELWARD ROY III
Address: 131 SHORT CREEK ROAD
City-St-Zip: DECATUR, TE 37322

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 exemption stated 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 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: GLORIA LAWLER

PD

01/16/2008

Electronic Signature of Signing Officer or Director

Date