

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736755

Entity Name: JACKSON COUNTY ARC, INC.**Current Principal Place of Business:**2973 PENNSYLVANIA AVENUE
MARIANNA, FL 32448**Current Mailing Address:**2973 PENNSYLVANIA AVENUE
MARIANNA, FL 32448 US**FEI Number:** 59-1533175**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HENDERSON, FRANCES
2973 PENNSYLVANIA AVENUE
MARIANNA, FL 32448 US*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**Officer/Director Detail :**

Title	P
Name	WUNDERLY, JIM
Address	P.O. BOX 455
City-State-Zip:	COTTONDALE FL 32431

Title	D
Name	PARKER, JAMES
Address	P.O. BOX 370
City-State-Zip:	SNEADS FL 32460

Title	S
Name	LOMAN-GREENE, LANNETTA
Address	3646 POPULAR SPRINGS ROAD
City-State-Zip:	MARIANNA FL 32446

Title	D
Name	HENDRICKSON, KAREN
Address	4938 HIGHWAY 2
City-State-Zip:	MALONE FL 32445

Title	D
Name	PENDERGRASS, DWAIN
Address	2541 WOODS VIEW DRIVE
City-State-Zip:	MARIANNA FL 32446

Title	VP
Name	MURPHY, MARGARET
Address	1766 MUTUAL RD
City-State-Zip:	ALFORD FL 32420

I hereby 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 all other like empowered.

SIGNATURE: JIM WUNDERLY**PRESIDENT****01/05/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date