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: JOSEPH DEGRAAF, JR	PRESIDENT	02/07/2019			

SIGNATURE: JOSEPH DEGRAAF, JR.

Electronic Signature of Signing Officer/Director Detail

# Name and Address of Current Registered Agent:

DEGRAAF, JOSEPH ANTHONY JR. 2439 CAMORS RD JAY, FL 32565 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	E: JOSEPH DEGRAAF JR.			02/07/2019	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	Р	Title	VP		
Name	DEGRAAF, JOSEPH ANTHONY JR.	Name	HAWTHORNE, JEFF		
Address	2439 CAMORS RD	Address	2762 HARVEST RD.		
City-State-Zip:	JAY FL 32565	City-State-Zip:	JAY FL 32565		
Title	S	Title	т		
Name	JORDAN, MINDY	Name	WILLIS, HEATHER		
Address	3375 N SIMMONS RD	Address	5710 OLD POLLARD RD		
City-State-Zip:	JAY FL 32565	City-State-Zip:	JAY FL 32565		

## Certificate of Status Desired: No

FILED Feb 07, 2019

Secretary of State

#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 755646**

Entity Name: JAY RECREATION ASSOCIATION, INC.

### **Current Principal Place of Business:**

4213 BOOKER LN JAY, FL 32565

## **Current Mailing Address:**

P.O. BOX 241 JAY, FL 32565 US

## FEI Number: 56-2588072

2152083118CC

Date

PRESIDENT