

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012765

Entity Name: BAKER CORRECTIONAL DEVELOPMENT CORPORATION**Current Principal Place of Business:**1 SHERIFF'S OFFICE DRIVE
MACCLENLY, FL 32063**Current Mailing Address:**1 SHERIFF'S OFFICE DRIVE
MACCLENLY, FL 32063**FEI Number:** 20-8376555**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COX, JEFFREY A
1 SHERIFF'S OFFICE DRIVE
MACCLENLY, FL 32063 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:** JEFFREY COX

02/05/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	BARTON, PAULA
Address	1 SHERIFF'S OFFICE DRIVE
City-State-Zip:	MACCLENLY FL 32063

Title	PD
Name	KNABB, TODD
Address	1 SHERIFF'S OFFICE DRIVE
City-State-Zip:	MACCLENLY FL 32063

Title	VPD
Name	PAYNE, LARRY
Address	1 SHERIFF'S OFFICE DRIVE
City-State-Zip:	MACCLENLY FL 32063

Title	D
Name	ROBINSON, ALEX
Address	1 SHERIFF'S OFFICE DRIVE
City-State-Zip:	MACCLENLY FL 32063

Title	DIRECTOR
Name	DAVIS, JOSIE
Address	1 SHERIFF'S OFFICE DRIVE
City-State-Zip:	MACCLENLY FL 32063

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: TODD KNABB

PRESIDENT

02/05/2015

Electronic Signature of Signing Officer/Director Detail

Date