

**2022 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N20000008059

**Entity Name:** MOSE & ADELL JACKSON FOUNDATION, INC.

**FILED**  
**Oct 06, 2022**  
**Secretary of State**  
**1169853814CR**

**Current Principal Place of Business:**

203 HILL STREET  
WEWAHITCHKA, FL 32465

**Current Mailing Address:**

P.O. BOX 1343  
WEWAHITCHKA, FL 32465 US

**FEI Number: 85-3825368**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

JACKSON, JOHNNY  
228 HILL CIRCLE  
WEWAHITCHKA, FL 32465 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: JOHNNY JACKSON**

**10/06/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name JACKSON, JOHNNY SR  
Address P.O. BOX 54  
City-State-Zip: WEWAHITCHKA FL 32465

Title VP  
Name JACKSON, SHIRLEY A  
Address 7508 SHADOW BAY DRIVE  
City-State-Zip: PANAMA CITY FL 32404

Title S  
Name OWENS, TRACY  
Address 219 MORNING CREEK WAY  
City-State-Zip: PANAMA CITY FL 32404

Title D  
Name JACKSON, JOSEPH L  
Address 2006 NW 55TH AVE.  
H-10  
City-State-Zip: GAINESVILLE FL 32653

Title D  
Name ROULHAC, JASON  
Address 7508 SHADOW BAY DRIVE  
City-State-Zip: PANAMA CITY FL 32404

Title D  
Name MYERS, TERRY  
Address 5501 FRANK HOUGH ROAD  
City-State-Zip: PANAMA CITY FL 32404

Title D  
Name HUNTER, SANDRA  
Address 214 HILL CIRCLE  
City-State-Zip: WEWAHITCHKA FL 32465

Title D  
Name JACKSON, TAVEKA  
Address P.O. BOX 36041  
City-State-Zip: PANAMA CITY FL 32412

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*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: JOHNNY JACKSON**

**PRESIDENT**

**10/06/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name BROWN, APRIL  
Address 224 MASTERSON COURT  
City-State-Zip: EWING NJ 08618