## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 768675** 

FILED Apr 11, 2011 Secretary of State

Entity Name: BAKER COUNTY CONCERNED CITIZENS, INC.

Current Principal Place of Business: New Principal Place of Business:

9937 JAMES WILLIAMS ROAD GLEN ST. MARY, FL 32040

Current Mailing Address: New Mailing Address:

P.O. BOX 664

9937 JAMES WILLIAMS ROAD GLEN ST. MARY, FL 32040

FEI Number: 59-2969266 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOSEPH, THELMA H 9169 JOYCE LANE

SANDERSON, FL 32087 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

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: WILLIAMS, JAMES

Address: PO BOX 664 -WILLIAMS RD. City-St-Zip: GLEN ST. MARY, FL 32040

Title: VD

 Name:
 GIVENS, RANDY

 Address:
 RT. 1, BOX 998 HWY.127

 City-St-Zip:
 SANDERSON, FL 32087

Title: SD

Name: JOSEPH, THELMA H

Address: P.O. BOX 305 9169 JOYCE LANE

City-St-Zip: SANDERSON, FL 32087

Title: SD

Name: MANNING, EVERNEASE

Address: P.O. BOX 424

City-St-Zip: GLEN ST. MARY, FL 32040

Title: TD

Name: SMITH, MALICHI

Address: RT. 1, BOX 1050 HWY 127 City-St-Zip: SANDERSON, FL 32087

Title: RD

 Name:
 GRIFFIS, FREDDIE N

 Address:
 RT. 1, BOX 3F HWY 23A

 City-St-Zip:
 MACCLENNY, 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: JAMES WILLIAMS PD 04/11/2011