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 F. WILLIAMS | PD |  |
|------------------------------|----|--|
|------------------------------|----|--|

DOCUMENT# 768675

Entity Name: BAKER COUNTY CONCERNED CITIZENS, INC.

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## Current Principal Place of Business:

9169 JOYCE LANE SANDERSON, FL 32087

## **Current Mailing Address:**

P.O. BOX 305 9169 JOYCE LANE SANDERSON, FL 32087 US

## FEI Number: 59-2969266

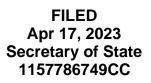
## Name and Address of Current Registered Agent:

JOSEPH/WILLIAMS, 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: THELMA H. JOSEPH/WILLIAMS |  |                 | 04/17/2023                     |  |
|--------------------------------------|--|-----------------|--------------------------------|--|
|                                      | Electronic Signature of Registered Agent |                 | Date                           |  |
| Officer/Director Detail :            |  |                 |                                |  |
| Title                                | PD                                       | Title           | VD                             |  |
| Name                                 | WILLIAMS, JAMES F.                       | Name            | WILLIAMS, GREGORY ANTHONY JR.  |  |
| Address                              | P.O. BOX 305                             | Address         | 10463 KING RUISE RD.           |  |
|                                      | 9169 JOYCE LANE                          | City-State-Zip: | GLEN ST. MARY FL 32040         |  |
| City-State-Zip:                      | SANDERSON FL 32087                       |                 |                                |  |
| Title                                | SD                                       | Title           | SD                             |  |
| Name                                 | JOSEPH-WILLIAMS, THELMA H                | Name            | MANNING, EVERNEASE             |  |
|                                      |  | Address         | P.O. BOX 424 JOHN WILLIAMS RD. |  |
| Address                              | P.O. BOX 305 9169 JOYCE LANE             | City-State-Zip  | GLEN ST. MARY FL 32040         |  |
| City-State-Zip:                      | SANDERSON FL 32087                       |                 |                                |  |
| <b>T</b> '41-                        | TD                                       | Title           | RD                             |  |
| Title                                | TD                                       | Name            | WILLIAMS, LATOYA               |  |
| Name                                 | PAIGE, GRETA D                           | Address         | P.O. BOX 664                   |  |
| Address                              | P.O. BOX 364                             | City-State-Zip: | GLEN ST. MARY FL 32040         |  |
| City-State-Zip:                      | SANDERSON FL 32087                       |                 |                                |  |

Electronic Signature of Signing Officer/Director Detail



Certificate of Status Desired: No

04/17/2023