

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705052

Entity Name: NORTH FLORIDA HOTEL & LODGING ASSOCIATION, INC.

Current Principal Place of Business:

208 N LAURA ST
SUITE 102
JACKSONVILLE, FL 32202

Current Mailing Address:

208 N LAURA ST
SUITE 102
JACKSONVILLE, FL 32202

FEI Number: 59-1843742

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRUEBLOOD, NICOLE ADMIN
208 N LAURA ST
SUITE 102
JACKSONVILLE, FL 32202 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

Officer/Director Detail :

Title D
Name TRUEBLOOD, NICOLE ADMIN
Address 208 N LAURA ST, STE. 102
City-State-Zip: JACKSONVILLE FL 32202

Title P
Name ECKERT, PAUL
Address PO BOX 3000
City-State-Zip: AMELIA ISLAND FL 32085

Title VP
Name SHAWN, FRISBEE
Address 1201 RIVERPLACE BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title T
Name DEARIN, SHANNON
Address 4670 LENIOR AVE S
City-State-Zip: JACKSONVILLE FL 32216

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: NICOLE A TRUEBLOOD

ADMINISTRATOR

01/14/2013

Electronic Signature of Signing Officer/Director Detail

Date