#### 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. 01/22/2016 SIGNATURE: CAITLIN MAUNEY **ADMINISTRATOR**

# **DOCUMENT# 705052**

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

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## **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

### Name and Address of Current Registered Agent:

MAUNEY, CAITLIN ADMINISTRATOR 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	CAITLIN MAUNEY			01/22/2016
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	ADMINISTRATOR	Title	TREASURER	
Name	MAUNEY, CAITLIN ADMINISTRATOR	Name	MCLELLAN, WAYNE	
Address	208 N LAURA ST, STE. 102	Address	39 BEACH LAGOON RD	
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	AMELIA ISLAND FL 32034	
Title	PRESIDENT	Title	VP OF EXTERNAL AFFAIRS	
Name	DEARIN, SHANNON	Name	CALIENDO, GINO	
Address	4670 S LENOIR AVE	Address	225 E. COASTLINE	
City-State-Zip:	JACKSONVILLE FL 32216	City-State-Zip:	JACKSONVILLE FL 32202	

Electronic Signature of Signing Officer/Director Detail

#### FILED Jan 22, 2016 Secretary of State CC9812547747

Certificate of Status Desired: No

Date