

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710143

Entity Name: NORTHEAST FLORIDA REGIONAL SCIENCE AND
ENGINEERING FAIR, INC.**Current Principal Place of Business:**2924 KNIGHTS LANE EAST
BUILDING #3
JACKSONVILLE, FL 32216**Current Mailing Address:**1745 BELMONTE AVE
JACKSONVILLE, FL 32207 US**FEI Number: 23-7407222****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BIEHLER, SUSAN
1601 8TH ST. S
JACKSONVILLE BEACH, FL 32250 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	P/D
Name	MEEKS, DOUGLAS
Address	1745 BELMONTE AVENUE
City-State-Zip:	JACKSONVILLE FL 32207

Title	DIRECTOR
Name	ZIENER, MARION MS.
Address	12064 OLDFIELD POINTE DR
City-State-Zip:	JACKSONVILLE FL 32223

Title	D
Name	SHADWELL, PERCY MR.
Address	3308 QUEEN PALM DRIVE
City-State-Zip:	JACKSONVILLE FL 32250

Title	TREASURER
Name	BIEHLER, SUSAN
Address	1601 8TH S. SOUTH
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	S/D
Name	THOMPSON, ANDY
Address	11042 KNOTTINGBY DR
City-State-Zip:	JACKSONVILLE FL 32257

Title	D
Name	BOULOS, ZIMMERMANN
Address	1524 SAN MARCO BLVD.
City-State-Zip:	JACKSONVILLE FL 32207

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: DOUGLAS C MEEKS**PRESIDENT****01/11/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date