Current Prin 6215 SAUTERI JACKSONVILL				
Current Ma	ling Address:			
P O BOX 77 JACKSONV	28 ILLE, FL 32238-7728 US			
FEI Number: 59-6215576		Certificate of Status Desired: No		
Name and Address of Current Registered Agent:				
CLAY, CAROL D 1931 WEB FOOT PLACE SAINT JOHNS, FL 32259 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.				
		tered office of regis	lered agent, or board, in the oldie of the	nua.
SIGNATURI	E: CAROL D. CLAY			01/15/2020
SIGNATURI				
	E: CAROL D. CLAY			01/15/2020
	E: CAROL D. CLAY Electronic Signature of Registered Agent	Title	RECORDING SECRETARY	01/15/2020
Officer/Dire	E: CAROL D. CLAY Electronic Signature of Registered Agent ctor Detail :			01/15/2020
<b>Officer/Dire</b> Title	E: CAROL D. CLAY Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	RECORDING SECRETARY	01/15/2020
<b>Officer/Dire</b> Title Name	E: CAROL D. CLAY Electronic Signature of Registered Agent Ctor Detail : PRESIDENT CLAY, CAROL D 1931 WEB FOOT PLACE	Title Name	RECORDING SECRETARY YOUNG, CHARLES	01/15/2020
<b>Officer/Dire</b> Title Name Address	E: CAROL D. CLAY Electronic Signature of Registered Agent Ctor Detail : PRESIDENT CLAY, CAROL D 1931 WEB FOOT PLACE	Title Name Address	RECORDING SECRETARY YOUNG, CHARLES 10331 NAKEMA DR. W.	01/15/2020
Officer/Dire Title Name Address City-State-Zip:	E: CAROL D. CLAY Electronic Signature of Registered Agent Ctor Detail : PRESIDENT CLAY, CAROL D 1931 WEB FOOT PLACE SAINT JOHNS FL 32259	Title Name Address City-State-Zip:	RECORDING SECRETARY YOUNG, CHARLES 10331 NAKEMA DR. W. JACKSONVILLE FL 32257	01/15/2020
Officer/Dire Title Name Address City-State-Zip: Title	E: CAROL D. CLAY Electronic Signature of Registered Agent Ctor Detail : PRESIDENT CLAY, CAROL D 1931 WEB FOOT PLACE SAINT JOHNS FL 32259 1VP	Title Name Address City-State-Zip: Title	RECORDING SECRETARY YOUNG, CHARLES 10331 NAKEMA DR. W. JACKSONVILLE FL 32257 TR	01/15/2020

Title

Name

Address

City-State-Zip:

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: GARRY CLAY

Title

Title

Name

Address

Name

Address

City-State-Zip:

Electronic Signature of Signing Officer/Director Detail

TREASURER

2VP

PORTS, MICHAEL

5316 DOWNINGTON DR.

JACKSONVILLE FL 32257

01/15/2020

Date

# 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### **DOCUMENT# 713023**

### Entity Name: SOUTHERN GENEALOGIST'S EXCHANGE SOCIETY, INC.

# Current Principal Place of Business

CORRESPONDING SECRETARY

4492 SAN LORENZO BOULEVARD

PRIBANIC, GEORGIA

HISTORIAN

City-State-Zip: JACKSONVILLE FL 32204

JACKSONVILLE FL 32224

DUCLOSE, ELIZABETH

2512 HERSCHEL ST

FILED Jan 15, 2020 Secretary of State 9652840992CC