

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717980

FILED
Feb 12, 2014
Secretary of State
CC2748823603**Entity Name:** AMERICAN CULINARY FEDERATION, FIRST COAST CHAPTER, INC.**Current Principal Place of Business:**320 OSCEOLA AVENUE
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**320 OSCEOLA AVENUE
JACKSONVILLE BEACH, FL 32250 US**FEI Number:** 26-2462439**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PODZAMSKY, JOHN M
320 OSCEOLA AVENUE
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:** JOHN M PODZAMSKY

02/12/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DT
Name	PODZAMSKY, JOHN M
Address	320 OSCEOLA AVENUE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DP
Name	SIEBER, DAWN
Address	320 OSCEOLA AVENUE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DS
Name	FROST, JOHN SEC
Address	320 OSCEOLA AVENUE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DV
Name	MOBLEY, CELESTIA W
Address	320 OSCEOLA AVENUE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DV
Name	NACKE, KEVIN L JR
Address	320 OSCEOLA AVENUE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	D
Name	BLINKHORN, MATT E
Address	320 OSCEOLA AVENUE
City-State-Zip:	JACKSONVILLE BEACH FL 32250

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: JOHN M PODZAMSKY

DT

02/12/2014

Electronic Signature of Signing Officer/Director Detail

Date