### 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 722946** 

Entity Name: FLORIDA STATE COLLEGE FOUNDATION, INC.

FILED Feb 27, 2013 Secretary of State CC1722379503

# **Current Principal Place of Business:**

501 WEST STATE STREET SUITE 104 JACKSONVILLE, FL 32202

## **Current Mailing Address:**

501 WEST STATE STREET SUITE 104 JACKSONVILLE, FL 32202 US

FEI Number: 23-7168438 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MILLER, JEANNE M 501 WEST STATE STREET SUITE 446T 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 MGR Title C

Name HIGHTOWER, MAGGIE Name BARNES, HARRISON WJR

Address 501 W. STATE ST, ROOM 104 Address 826 PRUDENTIAL DR., SUITE 1202

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32207

Title 1V Title 2V

Name BOWLING, KAREN Name CANNON, CARL N

Address 117 W DUVAL STREET, #400 Address 11457 FT. GEORGE ROAD

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32226

Title T Title S

Name COOK, ROBERT P Name BARRETT, MARTHA E

Address P.O. BOX 2249 Address 50 N LAURA STREET, 24TH FLOOR

City-State-Zip: LAKE CITY FL 32056 City-State-Zip: JACKSONVILLE FL 32202

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: MAGGIE HIGHTOWER

EXECUTIVE DIRECTOR (ACTING)

02/27/2013