

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726522

Entity Name: FLORIDA BLUE KEY, INC.**Current Principal Place of Business:**365 J. WAYNE REITZ UNION
UNIVERSITY OF FLORIDA
GAINESVILLE, FL 32611-2042**Current Mailing Address:**365 J. WAYNE REITZ UNION
UNIVERSITY OF FLORIDA
GAINESVILLE, FL 32611-2042 US**FEI Number:** 23-7378530**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HEEKIN, ROBERT A.
1 SLEIMAN PARKWAY
280
JACKSONVILLE, FL 32216 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:** ROBERT A. HEEKIN

06/21/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	ADLER, LAUREN
Address	365 J. WAYNE REITZ UNION UNIVERSITY OF FLORIDA
City-State-Zip:	GAINESVILLE FL 32611-2042

Title	VPM
Name	SHAW, LIBBY
Address	365 J WAYNE REITZ UNION
City-State-Zip:	GAINESVILLE FL 32603

Title	TREASURER
Name	GREENWALD, MICHAEL
Address	365 J. WAYNE REITZ UNION UNIVERSITY OF FLORIDA
City-State-Zip:	GAINESVILLE FL 32611-2042

Title	VP
Name	SCHULTE, ROBERT
Address	365 J WAYNE REITZ UNION
City-State-Zip:	GAINESVILLE FL 32611

Title	SECRETARY
Name	GRAMER, ALLISON
Address	365 J WAYNE REITZ UNION
City-State-Zip:	GAINESVILLE FL 32601

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: MICHAEL GREENWALD

TREASURER

06/21/2020

Electronic Signature of Signing Officer/Director Detail

Date