### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 741809** 

Entity Name: DECORATIVE ARTISTS OF JACKSONVILLE, INC.

# **Current Principal Place of Business:**

2012 BURPEE DRIVE JACKSONVILLE, FL 32210

## **Current Mailing Address:**

2012 BURPEE DRIVE

JACKSONVILLE, FL 32210 US

FEI Number: 59-1795321 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MARTIN, JOHNEL K 2012 BURPEE DRIVE JACKSONVILLE, FL 32210 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: JOHNEL K. MARTIN 01/12/2023

Electronic Signature of Registered Agent

Date

**FILED** Jan 12, 2023

**Secretary of State** 

7043524119CC

### Officer/Director Detail:

Title	PRESIDENT/DIRECTOR	Title	TREASURER
Name	MARTIN, JOHNEL K	Name	DIXON, NELL

8493 RUCKMAN AVENUE 2012 BURPEE DRIVE Address Address JACKSONVILLE FL 32221 JACKSONVILLE FL 32210 City-State-Zip: City-State-Zip:

Title **SECRETARY** Title 1ST VP/DIRECTOR Name WEBB, PENNY Name MCNAIR, VICKI

Address 8329 HOLLY HILL COVE Address 1866 ONTARIO COURT JACKSONVILLE FL 32221 City-State-Zip: City-State-Zip: MIDDLEBURG FL 32068

Title DIRECTOR Title 2ND VP/DIRECTOR Name CRAFT, JUDY Name ADAMS, SANDRA

Address 230 WINTER SPRINGS WAY Address 1428 SATSUMA ROAD City-State-Zip: JACKSONVILLE FL 32225 City-State-Zip: JACKSONVILLE FL 32259

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: JOHNEL K. MARTIN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT/DIRECTOR

01/12/2023