

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745980

Entity Name: SICKLE CELL DISEASE ASSOCIATION OF AMERICA
NORTHEAST FLORIDA CHAPTER, INC.**FILED**
Jan 29, 2019
Secretary of State
2872703118CC**Current Principal Place of Business:**4519 BRENTWOOD AVE
JACKSONVILLE, FL 32206**Current Mailing Address:**4519 BRENTWOOD AVE
JACKSONVILLE, FL 32206 US**FEI Number: 59-2582729****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HAY, ALPHA
4519 BRENTWOOD AVE
JACKSONVILLE, FL 32206 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: ALPHA HAY****01/29/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER EMERTIS
Name MCINTOSH, CHARLES B DR.
Address 4063 RIBAUT RIVER LANE
City-State-Zip: JACKSONVILLE FL 32208

Title CHAPLAIN
Name SMITH, JOSEPH
Address 1624 W. 29TH STREET
City-State-Zip: JACKSONVILLE FL 32209

Title TREASURER
Name GREEN, BENJAMIN
Address 7304 NATE CIRCLE
City-State-Zip: JACKSONVILLE FL

Title PRESIDENT
Name HAY, ALPHA
Address 1346 W. 15TH STREET
City-State-Zip: JACKSONVILLE FL 32209

Title B. MEMBER
Name ROGERS, LARRY
Address 1840 CLEVELAND STREET
City-State-Zip: JACKSONVILLE FL 32209

Title VP
Name PITTS, LORI
Address 10916 REGENCY DRIVE
City-State-Zip: JACKSONVILLE FL 32219

Title SECRETARY
Name MCCARTHY, ANEST
Address 3807 HARBORVIEW DR.
City-State-Zip: JACKSONVILLE FL 32208

Title PUBLIC RELATIONS
Name PATTERSON, WANDA
Address 7740 SOUTHSIDE BLVD #1403
City-State-Zip: JACKSONVILLE FL 32256

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: BENJAMIN T. GREEN**TREASURER****01/29/2019**

Electronic Signature of Signing Officer/Director Detail

Date