

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764023

**Entity Name:** FLORIDA CLIENTS COUNCIL, INC.**Current Principal Place of Business:**2425 TORREYA DR  
TALLAHASSEE, FL 32303**Current Mailing Address:**2425 TORREYA DR  
TALLAHASSEE, FL 32303 US**FEI Number:** 59-1436126**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SPUHLER, KENT R  
2425 TORREYA DR  
TALLAHASSEE, FL 32303 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	PRESIDENT
Name	COOKE, A H
Address	501 RIVERSIDE AVENUE, SUITE 600
City-State-Zip:	JACKSONVILLE FL 32202

Title	VP
Name	SANDERS, GLORIA
Address	403 SOUTH LINCOLN STREET
City-State-Zip:	BUSHNELL FL 33513

Title	PRESIDENT ELECT
Name	FERGUSON, CLEVELAND III
Address	117 WEST DUVAL STREET, SUITE 400
City-State-Zip:	JACKSONVILLE FL 32202

Title	SECRETARY
Name	MARTIN, DIANA
Address	2925 PGA BLVD., SUITE 200
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	TREASURER
Name	SODHI, ERIC M
Address	396 ALHAMBRA CIRCLE NORTH TOWER, 14TH FLOOR
City-State-Zip:	MIAMI FL 33134

*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:** A H COOKE**PRESIDENT****01/22/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date