2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2023
Secretary of State
3025043303CC

DOCUMENT# N01000000513

Entity Name: NONPROFIT CENTER OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

40 EAST ADAMS STREET
SUITE 100
JACKSONVILLE, FL 32202

Current Mailing Address:

40 EAST ADAMS STREET
SUITE 100
JACKSONVILLE, FL 32202 US

FEI Number: 59-3700428

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COUGHLIN, RENA
40 EAST ADAMS STREET
SUITE 100
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	OFFICER
Name	CONNER, TIMOTHY
Address	50 NORTH LAURA ST SUITE 3900
City-State-Zip:	JACKSONVILLE FL 32202

Title	CHAIRMAN
Name	JOHNSON, LISA V
Address	40 EAST ADAMS STREET SUITE 100
City-State-Zip:	JACKSONVILLE FL 32202

Title	OFFICER
Name	DUNN, AJANI
Address	4500 SAN PABLO ROAD
City-State-Zip:	JACKSONVILLE FL 32224

Title	OFFICER
Name	HICKS, DENO
Address	13245 ATLANTIC BOULEVARD SUITE 4-555
City-State-Zip:	JACKSONVILLE FL 32225

Title	CEO
Name	COUGHLIN, RENA
Address	40 EAST ADAMS STREET SUITE 100
City-State-Zip:	JACKSONVILLE FL 32202

Title	VC
Name	INMAN, D SAM
Address	637 N LEE STREET
City-State-Zip:	JACKSONVILLE FL 32204

Title	SECRETARY
Name	FINCHER, HEATHER
Address	ONE INDEPENDENT DRIVE 10TH FLOOR
City-State-Zip:	JACKSONVILLE FL 32202

Title	TREASURER
Name	MORRIS, TYLER
Address	2709 ART MUSEUM DRIVE
City-State-Zip:	JACKSONVILLE FL 32207

Continues on page 2

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: RENA COUGHLIN CEO 03/01/2023

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	OFFICER
Name	ALLEN, KIMBERLY DR.
Address	40 EAST ADAMS STREET SUITE 100
City-State-Zip:	JACKSONVILLE FL 32202

Title	OFFICER
Name	MCGRIFF, TAMMI
Address	40 EAST ADAMS STREET SUITE 100
City-State-Zip:	JACKSONVILLE FL 32202

Title	OFFICER
Name	STALLINGS, PAUL
Address	40 EAST ADAMS STREET SUITE 100
City-State-Zip:	JACKSONVILLE FL 32202

Title	OFFICER
Name	JACKSON, ROBERT
Address	40 EAST ADAMS STREET SUITE 100
City-State-Zip:	JACKSONVILLE FL 32202