### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000513

Entity Name: NONPROFIT CENTER OF NORTHEAST FLORIDA, INC.

FILED
Apr 15, 2016
Secretary of State
CC7730582370

# **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
 OTHER
 Title
 CHAIRMAN

 Name
 SMITH, CONNIE
 Name
 COOK, SANDRA

 Address
 1 INDEPENDENT DRIVE, 10TH FLOOR
 Address
 140 LAUREL LANE

City-State-Zip: JACKSONVILLE FL 32202

Title CEO Title TREASURER

Name HALL, SHERRY Name COUGHLIN, RENA

Address 40 EAST ADAMS STREET

Address 231 E FORSYTH STREET SUITE 100

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32202

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.

Electronic Signature of Signing Officer/Director Detail