## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002957

Entity Name: DOWNTOWN VISION ALLIANCE, INC.

**FILED** Jan 28, 2022 **Secretary of State** 7702519723CC

## **Current Principal Place of Business:**

214 N HOGAN ST STE 120 JACKSONVILLE, FL 32202

## **Current Mailing Address:**

214 N HOGAN ST STE 120 JACKSONVILLE. FL 32202

FEI Number: 20-5076887 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

DOWNTOWN VISION, INC. 214 N HOGAN ST STE 120 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: JACOB A. GORDON 01/28/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **SECRETARY** Title DIRECTOR

BARAKAT, OLIVER Name Name **DURAND-STUEBBEN, TERESA** 

225 WATER STREET Address Address 1478 RIVERPLACE BLVD

#1402

128 EAST FORSYTH STREET

JACKSONVILLE FL 32202 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32207

Title CEO

City-State-Zip:

Title **CHAIRMAN** GORDON, JACOB Name

Name SAISSELIN, NUMA Address 214 N HOGAN STREET

Address **SUITE 120** 

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

Title **TREASURER** Title VC

Name DAVISON, PAUL Name STEWART, KERRI

Address 501 RIVERSIDE AVE Address 6805 SOUTHPOINT PKWY #800

City-State-Zip: JACKSONVILLE FL 32216 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.

01/28/2022 SIGNATURE: JACOB A. GORDON CEO