

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000006434

**Entity Name:** THE 1EIGHTY GROUP, INC.**Current Principal Place of Business:**9838 OLD BAYMEADOWS ROAD  
#264  
JACKSONVILLE, FL 32256**Current Mailing Address:**9838 OLD BAYMEADOWS ROAD  
#264  
JACKSONVILLE, FL 32256**FEI Number:** 80-0362744**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH, KIMBERLY B  
9838 OLD BAYMEADOWS ROAD  
#264  
JACKSONVILLE, FL 32256 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	D
Name	SMITH, DARREN
Address	9838 OLD BAYMEADOWS ROAD, #264
City-State-Zip:	JACKSONVILLE FL 32256

Title	D
Name	BROWN, WARREN
Address	9838 OLD BAYMEADOWS ROAD, #264
City-State-Zip:	JACKSONVILLE FL 32256

Title	VP
Name	MITCHELL, BADONNA
Address	9838 OLD BAYMEADOWS ROAD, #264
City-State-Zip:	JACKSONVILLE FL 32256

Title	D
Name	SMITH, KIMBERLY B
Address	9838 OLD BAYMEADOWS ROAD, #264
City-State-Zip:	JACKSONVILLE FL 32256

Title	P
Name	POOLE, STACEY
Address	9838 OLD BAYMEADOWS ROAD, #264
City-State-Zip:	JACKSONVILLE FL 32256

Title	ST
Name	SULLIVAN, RICKETA
Address	9838 OLD BAYMEADOWS ROAD, #264
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:** KIMBERLY SMITH**EXECUTIVE DIRECTOR****04/02/2016**

Electronic Signature of Signing Officer/Director Detail

Date