

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008634

Entity Name: FIRST COAST WORKSITE WELLNESS COUNCIL, INC.

Current Principal Place of Business:

900 UNIVERSITY BLVD NORTH
SUITE 205
JACKSONVILLE, FL 32211

Current Mailing Address:

PO BOX 551457
JACKSONVILLE, FL 32255 US

FEI Number: 27-0974577

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BELL, BRITNEE LYN
900 UNIVERSITY BLVD NORTH
SUITE 205
JACKSONVILLE, FL 32211 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: BRITNEE BELL

02/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title C
Name BELL , BRITNEE
Address 157 TOLLERTON AVENUE
City-State-Zip: SAINT JOHNS FL 32259

Title VC
Name STEIN, JENNIFER
Address 141 MARYS CT
City-State-Zip: SAINT MARYS GA 31558

Title CFO
Name DOWELL, REESE
Address 311 MAJESTIC EAGLE DRIVE
City-State-Zip: PONTE VEDRA FL 32081

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: BRITNEE BELL

CHAIR

02/13/2017

Electronic Signature of Signing Officer/Director Detail

Date