	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	D	Title	D
Name	MATECKI, PAUL L	Name	ERIKSEN, ELIZABETH L
Address	880 CARILLON PARKWAY	Address	880 CARILLON PARKWAY
City-State-Zip:	ST PETERSBURG FL 33716	City-State-Zip:	ST PETERSBURG FL 33716
Title	D		
Name	- WILLIAMS, DEBORA A		
Address	880 CARILLON PARKWAY		
City-State-Zip:	ST PETERSBURG FL 33716		

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: RAYMOND JAMES EMPLOYEE CHARITY FUND, INC.

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:

no above named entity submits this statement for the purpose of changing its registered unite of registered agent, or both, in the State of Fioth

ST PETERSBURG, FL 33716

Current Principal Place of Business:

Current Mailing Address:

880 CARILLON PARKWAY

DOCUMENT# N1000003087

PO BOX 12749 ST PETERSBURG, FL 33733-2749

FEI Number: 36-4670130

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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: ELIZABETH ERIKSEN

TREASURER

01/13/2014

Date

Electronic Signature of Signing Officer/Director Detail

FILED Jan 13, 2014 Secretary of State CC0007844644

Certificate of Status Desired: Yes

Date