

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009256

FILED
Jan 31, 2019
Secretary of State
9207792159CC

Entity Name: NORTHEAST FLORIDA CAMPERS FOUNDATION, INC.

Current Principal Place of Business:

6944 VAN GUNDY RD
JACKSONVILLE, FL 32208

Current Mailing Address:

6944 VAN GUNDY RD
JACKSONVILLE, FL 32208

FEI Number: 45-2233316

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORD-DAVIS, MONICA DR.
6944 VAN GUNDY RD
JACKSONVILLE, FL 32208 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 WASHINGTON, WILLIE
Address 4168 BRAEMERE DRIVE
City-State-Zip: SPRING HILL FL 34609

Title V
Name BROOKS, JAMES
Address 5938 WATERCOLOR DR.
City-State-Zip: LITHIA FL 33547

Title S
Name BOOTH, PEGGY
Address 2108 SPARKMAN RD.
City-State-Zip: PLANT CITY FL 33566

Title S
Name BRIDGEWATER, EMMA
Address 2839 SPOTTED EAGLE DRIVE
City-State-Zip: JACKSONVILLE FL 32226

Title T
Name WASHINGTON, ELIZABETH
Address 4168 BRAEMERE DRIVE
City-State-Zip: SPRING HILL FL 34609

Title SECRETARY
Name GRANT, SHARON
Address 8456 FINCH AVE, E.
City-State-Zip: JACKSONVILLE FL 32219

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 B. WASHINGTON

TREASURER

01/31/2019

Electronic Signature of Signing Officer/Director Detail

Date