## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006256

Entity Name: OAKLAND CENTER FOR EDUCATION AND ECONMIC

DEVELOPMENT, INC.

**Current Principal Place of Business:** 

1235 PIPPIN STREET JACKSONVILLE, FL 32206

**Current Mailing Address:** 

P O BOX 43462

JACKSONVILLE, FL 32203 US

FEI Number: 80-0793074 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON-LEE, SELINA 1235 PIPPIN STREET JACKSONVILLE, FL 32206 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

FILED Mar 28, 2016

**Secretary of State** 

CC0346289368

## Officer/Director Detail:

| Title           | DPT                   | Title           | D, TREASURER          |
|-----------------|-----------------------|-----------------|-----------------------|
| Name            | ROBINSON-LEE, SELINA  | Name            | JONES, JESSIE Y       |
| Address         | 1235 PIPPIN STREET    | Address         | 1025 DYAL STREET      |
| City-State-Zip: | JACKSONVILLE FL 32206 | City-State-Zip: | JACKSONVILLE FL 32206 |

TitleDSTitleD, HEALTH EDUCATIONNameLEE, SELINANameAHMED, SAPPHIRE DR.Address1235 PIPPIN STREETAddress4924 HAMPSHIRE DRIVECity-State-Zip:JACKSONVILLE FL 32206City-State-Zip:JACKSONVILLE FL 32209

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: SELINA ROBINSON-LEE

PROJECT DIRECTOR

03/28/2016