

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000007164

**Entity Name:** BETTER JACKSONVILLE BEACH, INC.

**Current Principal Place of Business:**

5 N 17TH AVE  
401  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

5 N 17TH AVE  
401  
JACKSONVILLE BEACH, FL 32250

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MCGOWAN, JONATHAN A  
5 N 17TH AVE  
401  
JACKSONVILLE BEACH, FL 32250 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 P  
Name MCGOWAN, JONATHAN A  
Address 5 N 17TH AVE, #401  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title VP  
Name STEVENS, WILLIAM  
Address 234 1ST ST N  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title B  
Name HALL, TONY  
Address 221 1ST ST N  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title B  
Name PRATT, GREG  
Address 111 BEACH BLVD  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title B  
Name MCGUIRE, VINCE  
Address 127 N 1ST AVE  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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: JONATHAN MCGOWAN**

**PRESIDENT**

**05/01/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date