

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000001464

Entity Name: THE SHOELACE FOUNDATION, INC.

Current Principal Place of Business:

50 NORTH LAURA STREET, 41ST FLOOR
JACKSONVILLE, FL 32202

Current Mailing Address:

P.O. BOX 551029
JACKSONVILLE, FL 32255

FEI Number: 47-3189249

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NELSON MULLINS RILEY & SCARBOROUGH, L.L.P.
ATTN: KELLY E. DUNN
50 NORTH LAURA STREET, 41ST FLOOR
JACKSONVILLE, FL 32202 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/FOUNDER
Name ROBINSON, DENARD
Address P.O. BOX 551029
City-State-Zip: JACKSONVILLE FL 32255

Title D/PRESIDENT
Name JAMES, COURTNEE
Address P.O. BOX 551029
City-State-Zip: JACKSONVILLE FL 32255

Title D/TREASURER
Name ROBINSON, DANIEL
Address P.O. BOX 551029
City-State-Zip: JACKSONVILLE FL 32255

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: COURTNEE JAMES

PRESIDENT

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date