

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000012065

**Entity Name:** 10-42 CORPORATION

**Current Principal Place of Business:**

15054 NW 147TH DRIVE  
ALACHUA, FL 32615

**Current Mailing Address:**

15054 NW 147TH DRIVE  
ALACHUA , FL 32615 US

**FEI Number:** 81-0971647

**Certificate of Status Desired:** No

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

HOWELL, LINDSAY G  
15054 NW 147TH DRIVE  
ALACHUA, FL 32615 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:** LINDSAY HOWELL

01/12/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HOWELL, LINDSAY G  
Address        15054 NW 147TH DRIVE  
City-State-Zip: ALACHUA FL 32615

Title            VP  
Name            BERTZYK, SHONTA S  
Address        2616 NW 52ND AVE  
City-State-Zip: GAINESVILLE FL 32605

Title            TREASURER  
Name            MICHAELS, NICOLLE P  
Address        16048 NW 208TH WAY  
City-State-Zip: HIGH SPRINGS FL 32643

Title            SECRETARY  
Name            CAMPOS, LAURA  
Address        4821 NW 27TH PLACE  
City-State-Zip: GAINESVILLE FL 32605

Title            MEM  
Name            BOSTICK, MEGAN  
Address        6157 AVENUE G  
City-State-Zip: MCINTOSH FL 32664

*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:** NICOLLE MICHAELS

TREASURER

01/12/2017

Electronic Signature of Signing Officer/Director Detail

Date