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

### 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/Direc	ctor Detail :			
Title	PRESIDENT	Title	VP	
Name	HOWELL, LINDSAY G	Name	BERTZYK, SHONTA S	
Address	15054 NW 147TH DRIVE	Address	2616 NW 52ND AVE	
City-State-Zip:	ALACHUA FL 32615	City-State-Zip:	GAINESVILLE FL 32605	
Title	TREASURER	Title	SECRETARY	
Name	MICHAELS, NICOLLE P	Name	CAMPOS, LAURA	
Address	16048 NW 208TH WAY	Address	4821 NW 27TH PLACE	
City-State-Zip:	HIGH SPRINGS FL 32643	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

# FILED Jan 12, 2017 Secretary of State CC5893590169

Certificate of Status Desired: No