2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000011968

Entity Name: ESTATE PLANNING COUNCIL OF NORTHEAST FLORIDA, INC.

FILED
Apr 27, 2022
Secretary of State
4517676111CC

Current Principal Place of Business:

187 SE STILES WAY LAKE CITY. FL 32025

Current Mailing Address:

187 SE STILES WAY LAKE CITY. FL 32025

FEI Number: 03-0450631 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOMBS OHMER, CHERRI 187 SE STILES WAY LAKE CITY, FL 32025 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 Title VPT

NameCOLE, JOHN PNameHARTSFIELD, REIDAddress1 INDEPENDENT DR STE 2300Address4600 TOUCHTON RD

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32246

Title S Title D

Name SOUSOU, MICHAEL J Name JOLLES, JAMIE M

Address 165 WELLS RD STE 204 Address 10375 CENTURION PKWY N STE 115

City-State-Zip: ORANGE PARK FL 32073 City-State-Zip: JACKSONVILLE FL 32256

Title D Title [

Name MAYFIELD, KAREN B Name DAVIS, MAMIE L

Address 76 S LAURA ST 20TH FL Address 1751 UNIVERSITY BLVD S SUITE C

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32216

Title EXECUTIVE SECRETARY
Name OHMER, CHERRI COOMBS

Address 187 SE STILES WAY
City-State-Zip: LAKE CITY FL 32025

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: CHERRI COOMBS OHMER EXECUTIVE SECRETARY 04/27/2022

Electronic Signature of Signing Officer/Director Detail

Date