

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37300

Entity Name: FIRST COAST MANUFACTURERS ASSOCIATION, INC.

Current Principal Place of Business:

1615 HUFFINGHAM ROAD
SUITE 2
JACKSONVILLE, FL 32216

Current Mailing Address:

1615 HUFFINGHAM ROAD
SUITE 2
JACKSONVILLE, FL 32216 US

FEI Number: 59-2922415

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAY, LAKE III
1615 HUFFINGHAM ROAD
SUITE 2
JACKSONVILLE, FL 32216 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: LAKE RAYY III

03/22/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name FROST, GARY
Address PO BOX 919
City-State-Zip: PALTKA FL 32178

Title D
Name ZANOELO, CARLOS
Address 16770 REBARD ROAD
City-State-Zip: BALDWIN FL 32234

Title D
Name GABEL, GEORGE
Address 50 NORTH LAURA ST
City-State-Zip: JACKSONVILLE FL 32202

Title D
Name MICHAEL, CORRIGAN
Address 119 SEWALD STREET
City-State-Zip: JACKSONVILLE FL 32204

Title D
Name AVERY, RON
Address 2807 N 10TH STREET
City-State-Zip: ST. AUGUSTINE FL 32084

Title D
Name WARYOLD, JOE
Address 735 EAST BAY STREET
City-State-Zip: JACKSONVILLE FL 32202

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: GARY FROST

D

03/22/2013

Electronic Signature of Signing Officer/Director Detail

Date