

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
May 08, 2013
Secretary of State
CC1797823077

Entity Name: ADVISORY COUNCIL OF THE RETIRED AND SENIOR VOLUNTEER PROGRAM (RSVP) OF DUVAL COUNTY, FLORIDA, INC.

Current Principal Place of Business:

150 EAST 1ST STREET
JACKSONVILLE, FL 32206

Current Mailing Address:

150 EAST 1ST STREET
JACKSONVILLE, FL 32206

FEI Number: 59-3240143

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CURE, WILLIAM
150 EAST 1ST STREET
JACKSONVILLE, FL 32206 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 C
Name CURE, WILLIAM
Address 11110 WOODLUM DRIVE W.
City-State-Zip: JACKSONVILLE FL 32218

Title VC
Name ROBINSON, ANGELA
Address 1241 HART STREET.
City-State-Zip: JACKSONVILLE FL 32209

Title T
Name MILLER, CLAUDIA
Address 601 N. OCEAN STREET #209
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: WILLIAM CURE

CHAIRMAN

05/08/2013

Electronic Signature of Signing Officer/Director Detail

_____ Date