

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000003323

**Entity Name:** GREATER NORTHWEST QUADRANT ASSOC., INC.

**Current Principal Place of Business:**

312 & 335 W 8TH ST  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

312 W 8TH ST  
JACKSONVILLE, FL 32206 US

**FEI Number:** 59-0941425

**Certificate of Status Desired:** No

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

BROWN, JAMES P. DR.  
312 W 8TH ST  
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:** JAMES P. BROWN

02/26/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name JOHNSON, SHANEKA L.  
Address 312 W 8TH ST  
City-State-Zip: JACKSONVILLE FL 32206

Title D  
Name BROWN, JAMES M.  
Address 312 WEST 8TH STREET  
City-State-Zip: JACKSONVILLE FL 32206

Title D  
Name PATEL, BHAVESHKUMAR  
Address 4896 NE 122ND AVE  
City-State-Zip: OXFORD FL 34484

Title D  
Name BROWN, JOHN PHILLIP  
Address 312 WEST 8TH STREET  
City-State-Zip: JACKSONVILLE FL 32206

Title D  
Name BOLDEN, IRENE  
Address 312 W. 8TH ST.  
City-State-Zip: JACKSONVILLE FL 32206

Title D  
Name HUERNEHENG, LU  
Address 3709 SAN PABLO RD S APT 407  
City-State-Zip: JACKSONVILLE FL 32224

*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:** JAMES PHILLIP BROWN

**PRESIDENT**

02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date