## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000004336

Entity Name: ST. JOHNS COUNTY VISITORS AND CONVENTION BUREAU,

INC.

FILED
Jan 16, 2013
Secretary of State
CC4994151666

#### **Current Principal Place of Business:**

29 OLD MISSION AVENUE ST. AUGUSTINE, FL 32084

## **Current Mailing Address:**

29 OLD MISSION AVENUE ST. AUGUSTINE, FL 32084 US

FEI Number: 59-3335084 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

GOLDMAN, RICHARD B 29 OLD MISSION AVENUE ST. AUGUSTINE, FL 32084 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 CHR Title VC

Name DAVID, MARIOTTI Name O'NEILL, ROBERT

Address 607 PONTE VEDRA BLVD. Address 32 AVENIDA MENENDEZ

City-State-Zip: PONTE VEDRA FL 32082 City-State-Zip: PONTE VEDRA BEACH FL 32084

Title PC Title TRE

Name O'NEILL, ROBERT Name FINNEGAN, JOE

Address 32 AVENIDA MENEDEZ Address 279 ST. GEORGE STREET

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL 32084

TitleSTitleEXECUTIVE DIRECTORNameFLEMING, KATHYNameGOLDMAN, RICHARDAddress81 LIGHTHOUSE AVENUEAddress29 OLD MISSION AVENUE

City-State-Zip: ST. AUGUSTINE FL 32080 City-State-Zip: ST.AUGUSTINE FL 32084

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: RICHARD GOLDMAN

**EXECUTIVE DIRECTOR** 

01/16/2013