

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003295

Entity Name: SAINT JOHNS NORTHWEST COMMERCIAL PROPERTY OWNERS ASSOCIATION, INC.

FILED
Feb 05, 2014
Secretary of State
CC8918377877

Current Principal Place of Business:

475 W. TOWN PLACE
SUITE 112
ST AUGUSTINE, FL 32092

Current Mailing Address:

5455 A1A SOUTH
ST AUGUSTINE, FL 32080 US

FEI Number: 59-3392626

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAY MANAGEMENT SERVICE INC
5455 A1A SOUTH
ST. AUGUSTINE, FL 32080 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
Name JACK, PETER
Address 5455 A1A SOUTH
City-State-Zip: ST AUGUSTINE FL 32080

Title VP
Name IVANOV, VESSELIN
Address 5455 A1A SOUTH
City-State-Zip: ST AUGUSTINE FL 32080

Title S/T
Name OLIASAMI, JEFFREY
Address 5455 A1A SOUTH
City-State-Zip: ST AUGUSTINE FL 32080

Title D
Name HAHN, JAMES
Address 5455 A1A SOUTH
City-State-Zip: ST AUGUSTINE FL 32080

Title D
Name CAIN, HERB
Address 5455 A1A SOUTH
City-State-Zip: ST. AUGUSTINE FL 32080

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: JEFFREY OLIASAMI

SECRETARY

02/05/2014

Electronic Signature of Signing Officer/Director Detail

Date