

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000036148

**Entity Name:** NORTHEAST FLORIDA MANAGEMENT, LLC.

**Current Principal Place of Business:**

614 PECAN PARK ROAD  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

305 JULIA STREET  
NEW SMYRNA BEACH, FL 32168 US

**FEI Number:** 20-4641452

**Certificate of Status Desired:** No

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

KERN, JAMES W  
305 JULIA STREET  
NEW SMYRNA BEACH, FL 32168 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

**Authorized Person(s) Detail :**

Title MGR  
Name MATHIS, CAROLYN  
Address 24648 HARBORVIEW DRIVE  
City-State-Zip: PONTE VEDRA FL 32082

Title MGR  
Name KERN, JAMES W  
Address 1550 MADRUGA AVENUE, STE. 130  
City-State-Zip: CORAL GABLES FL 33146

Title GENERAL MANAGER  
Name HEIDECKER, JOHN  
Address 614 PECAN PARK RD.  
City-State-Zip: JACKSONVILLE FL 32218

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN HEIDECKER

GM

04/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date