2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2010
Secretary of State

DOCUMENT# 730278

Entity Name: THE DEPRESSION GLASS CLUB OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

1725 ART MUSEUM DRIVE
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

1725 ART MUSEUM DRIVE
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 59-6559973 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLLEY, JR., JOEL R TD
1725 ART MUSEUM DRIVE
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: HOLLEY, CAROLYN S PD
Address: 1725 ART MUSEUM DRIVE
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD
Name: HOLLEY, JR., JOEL R TD
Address: 1725 ART MUSEUM DRIVE
City-St-Zip: JACKSONVILLE, FL 32207

Title: VPD
Name: LACOMB, LEE VPD
Address: 3012 WALTON STREET
City-St-Zip: JACKSONVILLE, FL 32207

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: C. SUE HOLLEY PRES 01/04/2010

Electronic Signature of Signing Officer or Director Date