

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766251

FILED
Feb 06, 2012
Secretary of State

Entity Name: NORTHEAST FLORIDA LEAGUE OF CITIES, INC.

Current Principal Place of Business:

2200 A1A SOUTH
ST. AUGUSTINE, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

2200 A1A SOUTH
ST. AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 59-2560639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROYLE, MAX
2200 A1A SOUTH
ST. AUGUSTINE, FL 32080 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: D
Name: RENNINGER, J.R.
Address: 2042 PARK AVENUE
City-St-Zip: ORANGE PARK, FL 32073

Title: ST
Name: ROYLE, MAX
Address: 2200 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: D
Name: HILDRETH, MARY LOU
Address: PO BOX 420
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: D
Name: TOTMAN, STANLEY
Address: 10 US 90 WEST
City-St-Zip: BALDWIN, FL 32234

Title: D
Name: PAGE, ROBERT
Address: 321 WALNUT STREET
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: P
Name: BORNO, MICHAEL
Address: 800 SEMINOLE ROAD
City-St-Zip: ATLANTIC BEACH, FL 32233

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: MAX ROYLE

ST

02/06/2012

Electronic Signature of Signing Officer or Director

Date