

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001517

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO LOCAL 1408, INC.

**Current Principal Place of Business:**

2040 E 21 ST  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 3795  
JACKSONVILLE, FL 32206

**New Mailing Address:**

2040 E 21 ST  
JACKSONVILLE, FL 32206

**FEI Number:** 59-0250967

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, ROMIA PRES.  
2040 E 21 ST  
JACKSONVILLE, FL 32206 US

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

JOHNSON, LEWIS PRES.  
2040 E 21 ST  
JACKSONVILLE, FL 32206 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:** LEWIS JOHNSON

05/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** JOHNSON, LEWIS PRES.  
**Address:** 2040 E 21 ST  
**City-St-Zip:** JACKSONVILLE, FL 32206

**Title:** DV  
**Name:** GARDNER, NATHANIEL V-PRES.  
**Address:** 2040 E 21 ST  
**City-St-Zip:** JACKSONVILLE, FL 32206

**Title:** DST  
**Name:** MCCRAY, GARY SECY  
**Address:** 2040 E 21 ST  
**City-St-Zip:** JACKSONVILLE, FL 32206

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:** GARY MCCRAY

SECY

05/01/2012

Electronic Signature of Signing Officer or Director

Date