

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008620

FILED
Jan 05, 2012
Secretary of State

Entity Name: UNA VOCE OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

11307 RIVER KNOLL DRIVE
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

11307 RIVER KNOLL DRIVE
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 20-1221080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, EDWARD J
324 SWEETBRIAR BRANCH LANE
JACKSONVILLE, FL 32259 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: HOLLMANN, ROBERT MR.
Address: 598 WELLS LANDING DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: D
Name: WNOROWSKI, JR., EDWARD J MR.
Address: 11307 RIVER KNOLL DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: BUSSJAEGER, WILLIAM MR.
Address: 303 MATTHEWS RIDGE
City-St-Zip: ST. MARYS, GA 31558

Title: D
Name: STICKLEY, GAIL MISS.
Address: 1327 CHALLEN AVENUE
City-St-Zip: JACKSONVILLE, FL 32005

Title: D
Name: OWENS, KATHERINE MISS
Address: 220 MILL LANE # 101
City-St-Zip: ST. AUHUSTINE, FL 32084

Title: D
Name: DOBBS, RACHEL MRS.
Address: 9765 SOUTHBROOK DR. # 3705
City-St-Zip: JACKSONVILLE, FL 32256

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: EDWARD WNOROWSKI, JR.

MR.

01/05/2012

Electronic Signature of Signing Officer or Director

Date