



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 02, 2007 8:00 am
Secretary of State

07-02-2007 90038 021 ****61.25

DOCUMENT # N07524 1. Entity Name NORTHEAST FLORIDA VETERANS COUNCIL, INCORPORATED					
Principal Place of Business 117 W DUVAL ST STE 175 JACKSONVILLE, FL 32202 US			Mailing Address 221 N HOGAN STREET SUITE #147 JACKSONVILLE, FL 32202-4201 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-2525999				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SPRUILL, ROBERT L JR 117 W DUVAL ST STE 175 JACKSONVILLE, FL 32202			Name Street Address (P.O. Box Number is Not Acceptable) City		
			State FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Robert L. Spruill Jr. <small>Signature, typed or printed name of registered agent and title if applicable.</small>		 <small>(NOTE-Registered Agent signature required when reinstating)</small>		6/29/07 <small>DATE</small>	
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	C	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WILLIAMS-BEY, HALLIE		NAME		
STREET ADDRESS	1567 W 9TH STREET		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32209		CITY-ST-ZIP		
TITLE	1C	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LOCKHART, JOHN		NAME		
STREET ADDRESS	5018 RIVERBROOK CT.		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32272		CITY-ST-ZIP		
TITLE	2C	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SPRUILL, ROBERT L JR		NAME		
STREET ADDRESS	117 W DUVAL ST #175		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32202		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WHITE, BARBARA		NAME		
STREET ADDRESS	3846 SUDBURY ST		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32210		CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	STRINGFELLOW, BETTY		NAME	KATHY CAYTON	
STREET ADDRESS	2543 LAKE SHORE BLVD		STREET ADDRESS	2192 ROBERT PAUL ST	
CITY-ST-ZIP	JACKSONVILLE, FL 32210		CITY-ST-ZIP	ORANGE PARK, FLORIDA 32073	
TITLE	C	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KIRBY, LIZETTE		NAME		
STREET ADDRESS	3812 ROBBY DR		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Robert L. Spruill Jr. <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			6/29/07 904-859-8764 <small>Date Daytime Phone #</small>		