

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13483

FILED
Apr 08, 2011
Secretary of State

Entity Name: LEAGUE OF WOMEN VOTERS OF JACKSONVILLE / FIRST COAST, INC

Current Principal Place of Business:

3039 CYPRESS CREEK DR E
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 41184
JACKSONVILLE, FL 32203

New Mailing Address:

FEI Number: 59-6178307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEDER, JO ANN
3039 CYPRESS CREEK DR E
PONTE VEDRA BEACH, FL 32082 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: P
Name: CARITHERS, KATHERINE
Address: 223 OCEAN BLVD
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VP
Name: WINKLER, JOHN
Address: 2515 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: VP
Name: ROSS, KATHERINE
Address: 1606 ATLANTIC AVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S
Name: WEISZ, ANN
Address: 3421 HIDDEN LAKE DR W
City-St-Zip: JACKSONVILLE, FL 32216

Title: T
Name: FEDER, JO ANN
Address: 3039 CYPRESS CREEK DR E
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D
Name: MCCHAREN, HOPE
Address: 6059 HECKSCHER DR.
City-St-Zip: JACKSONVILLE, FL 32226

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: JO ANN FEDER

T

04/08/2011

Electronic Signature of Signing Officer or Director

Date