2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13483

Feb 21, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

3039 CYPRESS CREEK DR E 8090 ATLANTIC BLVD. PONTE VEDRA BEACH, FL 32082

A74

JACKSONVILLE, FL 32211

Current Mailing Address: New Mailing Address:

P.O. BOX 41184 P.O. BOX 43398

JACKSONVILLE, FL 32203 JACKSONVILLE, FL 32203

FEI Number: 59-6178307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FEDER, JO ANN ADAMS, TIFFANY 8090 ATLANTIC BLVD 3039 CÝPRESS CREEK DR E

PONTE VEDRA BEACH, FL 32082 JACKSONVILLE, FL 32211 US 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: TIFFANY ADAMS 02/21/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

DEMONBREUN, ANGELA Name: Address: 5502 BRISTOL BAY LANE N City-St-Zip: JACKSONVILLE, FL 32244

Title:

TRAPP, ASHLEY Name:

Address: 5201 ATLANTIC BLVD., #147 City-St-Zip: JACKSONVILLE, FL 32207

Title:

KANE, MARIANNA Name: Address: 333 OCEAN BLVD

City-St-Zip: ATLANTIC BEACH, FL 32233

Title:

ADAMS, TIFFANY Name:

8090 ATLANTIC BLVD., #A74 Address: City-St-Zip: JACKSONVILLE, FL 32211

Title:

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

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: TIFFANY ADAMS T 02/21/2012