

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29444

FILED
Jan 08, 2012
Secretary of State

Entity Name: THE NORTH EAST FLORIDA JAZZ ASSOCIATION, INC.

Current Principal Place of Business:

51 WEBER LANE
PALM COAST, FL 32135

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 352569
PALM COAST, FL 32135

New Mailing Address:

FEI Number: 59-2831966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCOY, MURIEL D
51 WEBER LANE
PALM COAST, FL 32135 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: MCCOY, MURIEL D PRES.
Address: P.O. BOX 352569
City-St-Zip: PALM COAST, FL 32135 US

Title: V
Name: DOUGLAS, CARN V-PRES
Address: 5 ROLLINS AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: T
Name: COLE, MYRA J TREAS
Address: PO BOX 351327
City-St-Zip: PALM COAST, FL 32135 US

Title: S
Name: GOMEZ, BARBARA SEC.
Address: 6 ERHLING LANE
City-St-Zip: PALM COAST, FL 32164 US

Title: FS
Name: EDWARDS, HAZEL FIN.SEC
Address: 53 TREE TOP CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MEMB
Name: HECKATHORN, JOYCE
Address: 15 COOLWATER CT
City-St-Zip: PALM COAST, FL 32137 US

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: MURIEL D MCCOY

P

01/08/2012

Electronic Signature of Signing Officer or Director

Date