

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006929

1. Entity Name

NORTH EAST FLORIDA CHAPTER OF CONSTRUCTION FINANCIAL MANAGEMENT ASSOCIATION, INC.

Principal Place of Business

6877 PHILLIPS INDUSTRIAL BLVD.
JACKSONVILLE FL 32256

Mailing Address

6877 PHILLIPS INDUSTRIAL BLVD.
JACKSONVILLE FL 32256

2. Principal Place of Business

3. Mailing Address

109 OCEANS EDGE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Ponte Vedra FL

Zip

Country

Zip

Country

32082

ST. JOHNS

4. FEI Number

59-3568486

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LONGO, RICHARD J
6877 PHILLIPS INDUSTRIAL BLVD.
JACKSONVILLE FL 32256

7. Name and Address of New Registered Agent

Name

JOE PATTISON

Street Address (P.O. Box Number is Not Acceptable)

109 OCEANS EDGE DRIVE

City

Ponte Vedra

FL

Zip Code

32082

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

JOE PATTISON

(NOTE: Registered Agent signature required when reinstating)

5-1-02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE P
NAME CARSWELL, JOHN
STREET ADDRESS 6722 S. PHILLIPS PKWY DR
CITY-ST-ZIP JACKSONVILLE FL 32241

☒ Delete

TITLE VP
NAME HIGGINDOHAN, KAREN
STREET ADDRESS 7587 WILSON BLVD
CITY-ST-ZIP JACKSONVILLE FL 32210

☒ Delete

TITLE T
NAME NEWMAN, NEIL
STREET ADDRESS 2514 IROQUOIS AVE
CITY-ST-ZIP JACKSONVILLE FL 32210

☒ Delete

TITLE D
NAME LONGO, RICH
STREET ADDRESS 6877 PHILLIPS INOVSTREST BLVD
CITY-ST-ZIP JACKSONVILLE FL 32256

☒ Delete

TITLE D
NAME WITT, SCOTT
STREET ADDRESS 2800 HARTLEY RD
CITY-ST-ZIP JACKSONVILLE FL 32257

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME KELLY KENNEDY
STREET ADDRESS 6963-1 BUSINESS PARK BLVD. N
CITY-ST-ZIP JACKSONVILLE, FL 32256

☐ Change ☒ Addition

TITLE VP
NAME JEFFREY WALRAVEN
STREET ADDRESS 5150 BELFORT RD SOUTH, BLDG. 600
CITY-ST-ZIP JACKSONVILLE, FL 32256

☐ Change ☒ Addition

TITLE T
NAME JOE PATTISON
STREET ADDRESS 109 OCEANS EDGE DR
CITY-ST-ZIP PONTE VEDRA, FL 32082

☐ Change ☒ Addition

TITLE D
NAME JOHNNA JONES
STREET ADDRESS 2900 HARTLEY ROAD
CITY-ST-ZIP JACKSONVILLE, FL 32257

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-02

Date

(904) 694-4024

Daytime Phone #

FILED
Aug 13, 2002 8:00 am
Secretary of State

07-09-2002 90374 030 ****61.25

41400



DO NOT WRITE IN THIS SPACE