2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED
Jun 04, 2003 8:00 am
Secretary of State
05-01-2003 90759 040 ****70.00

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DOCUMENT # N99000006929

1. Entity Name
NORTH EAST FLORIDA CHAPTER OF CONSTRUCTION FINAN CIAL MANAGEMENT ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6977 PHILLIPS INDUSTRIAL BLVD. JACKSONVILLE FL 32256	109 OCEANS EDGE DR PONTE VEDRA FL 32082

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
2900 Hartley Road	2900 Hartley Road
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Jacksonville, FL	City & State: Jacksonville, FL
Zip: 32257 Country: USA	Zip: 32257 Country: USA

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

PATTISON, JOE
109 OCEANS EDGE DRIVE
PONTE VEDRA FL 32082

7. Name and Address of New Registered Agent

Name: Kevin C. Morris
Street Address (P.O. Box Number is Not Acceptable): 1895 Wilkinson Dr E.
City: Jacksonville FL Zip Code: 32246

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: Kevin C. Morris 4/16/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KENNEDY, KELLY 6963-1 BUSINESS PARK BLVD. N JACKSONVILLE FL 32256	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Jeff Walraven 5150 Belfort Rd, South, Bldg 600 Jacksonville, FL 32256	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WALRANEN, JEFFREY 5150 BELFORT RD SOUTH, BLDG. 600 JACKSONVILLE FL 32256	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP; D Kelly Kennedy 6968-1 Business Park Blvd. N Jacksonville, FL 32256	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PATTISON, JOE 109 OCEANS EDGE DR PONTE VEDRA FL 32082	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Kevin C. Morris 6977 Phillips Industrial Blvd. Jacksonville, FL 32246	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, JOHNNA 2900 HARTLEY ROAD JACKSONVILLE FL 32257	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D; VP Johnna L. Jones 2900 Hartley Road Jacksonville, FL 32257	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WITT, SCOTT 2900 HARTLEY RD JACKSONVILLE FL 32257	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Danny Pardue 4804 Korman Blvd. Jacksonville, FL 32224	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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 REQUIRED 4/28/03 904-899-9215
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #