

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703859

Entity Name: JACKSONVILLE SPEECH AND HEARING CENTER, INC.**Current Principal Place of Business:**1010 N. DAVIS STREET
SUITE 101
JACKSONVILLE, FL 32209**Current Mailing Address:**40 EAST ADAMS STREET, SUITE LL20
JACKSONVILLE, FL 32202 US**FEI Number:** 59-0970718**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HOWLAND, MICHAEL RAYMOND
40 EAST ADAMS STREET, SUITE LL20
JACKSONVILLE, FL 32202 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:** MICHAEL R HOWLAND

04/14/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PEPIS, RICK DDS
Address 113 OLD PONTE VEDRA DRIVE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR
Name HEARD, ROSA
Address 11844 MANDARIN ROAD
City-State-Zip: JACKSONVILLE FL 32223

Title CEO
Name HOWLAND, MICHAEL RAYMOND
Address 1128 N. LAURA STREET
City-State-Zip: JACKSONVILLE FL 32206

Title DIRECTOR
Name CLARK, BRIAN P
Address 5213 RIVER PARK VILLA DRIVE
City-State-Zip: ST. AUGUSTINE FL 32092

Title DIRECTOR
Name O'LEARY, JIM
Address 111 RIVERSIDE AVENUE
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name PINCOMB, MYRON
Address 4899 BELFORT ROAD
SUITE 190
City-State-Zip: JACKSONVILLE FL 32224

Title TREASURER
Name PURCELL, KEN
Address 227 ROSCOE BOULEVARD, N
City-State-Zip: PONTE VEDRA FL 32082

Title DIRECTOR
Name RISNER, PAUL E
Address 400 NORTH LOMBARDY LOOP
City-State-Zip: ST. JOHNS FL 32259

Continues on page 2

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: MICHAEL R HOWLAND

PRESIDENT/CEO

04/14/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WEINROTH, ERIC
Address 23 MARIA PLACE
City-State-Zip: PONTE VEDRA FL 32082

Title CHAIR ELECT
Name BRENNAN, KIRK
Address 12525 WESTBERRY MANOR DRIVE
City-State-Zip: JACKSONVILLE FL 32223

Title DIRECTOR
Name SHERMAN, STEVEN
Address 95035 WOODBERRY LANE
City-State-Zip: FERNANDINA BEACH FL 32034

Title SECRETARY
Name KOURY, ANGIE
Address 4221 BAYMEADOWS ROAD
SUITE # 5
City-State-Zip: JACKSONVILLE FL 32217

Title DIRECTOR
Name EDGE, ROBIN PHD, CCC-SLP
Address 2800 UNIVERSITY BOULEVARD, NORTH
City-State-Zip: JACKSONVILLE FL 32211

Title DIRECTOR
Name VALENTINE, RICHARD E
Address 10950-60 SAN JOSE BLVD STE 167
City-State-Zip: JACKSONVILLE FL 32223

Title DEVELOPMENT COMMITTEE CHAIR
Name WHITE, JIM CPA
Address 1224 SPRING BRANCH ROAD
City-State-Zip: SAINT JOHNS FL 32259

Title DIRECTOR
Name HORNE, SUZANNE
Address 12876 PLUMMER GRANT ROAD
City-State-Zip: JACKSONVILLE FL 32258

Title DIRECTOR
Name WOHLERS, SCOTT
Address 1535 PEACHTREE CIRCLE, N
City-State-Zip: JACKSONVILLE FL 32207

Title CHAIRMAN
Name ELLIOTT, LYNNE
Address 3651 SALTMEADOW CT. N
City-State-Zip: JACKSONVILLE FL 32224

Title STRATEGIC OPPORTUNITIES VICE
CHAIR
Name BARKER, MAE PHD, BCBA-D
Address 2415 STAFFORD DRIVE
City-State-Zip: ORANGE PARK FL 32073

Title DIRECTOR
Name WHITKOP, ROBERT
Address 13166 ANNANDALE DRIVE, S
City-State-Zip: JACKSONVILLE FL 32225

Title GOVERNANCE COMMITTEE CHAIR
Name BRITTLE, ANNE PMP
Address 841 PRUDENTIAL DRIVE
SUITE 900
City-State-Zip: JACKSONVILLE FL 32207

Title STRATEGIC OPPORTUNITIES CHAIR
Name PITTENGER, LINDA M PHD
Address 257 ROSCOE BLVD
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title DIRECTOR
Name W Aidner, JOHN WHITMAN MD
Address 1848 COMMODORE POINT DRIVE
City-State-Zip: FLEMING ISLAND FL 32003

Title DIRECTOR
Name HARGREAVES, MICHELE MD
Address 4203 BELFOR ROAD, SUITE 340
ROGER MAIN BUILDING
City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR
Name TAYLOR, BRYAN
Address 193 BERMUDA GREENS AVENUE
City-State-Zip: PONTE VEDRA BEACH FL 32081