2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705382

Entity Name: NORTHEAST FLORIDA SAFETY COUNCIL, INC.

FILED Feb 09, 2017 Secretary of State CC4885931603

Current Principal Place of Business:

1725 ART MUSEUM DRIVE JACKSONVILLE. FL 32207

Current Mailing Address:

1725 ART MUSEUM DRIVE JACKSONVILLE, FL 32207

FEI Number: 59-0536003 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLLEY, CAROLYN S 1725 ART MUSEUM AVENUE JACKSONVILLE, FL 32207 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: CAROLYN S HOLLEY 02/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	PRESIDENT	Title	BOARD CHAIR
Name	HEMPSELL, DANIEL	Name	HEARN, LEO

Address 1725 ART MUSEUM DRIVE Address 1725 ART MUSEUM DRIVE
City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: JACKSONVILLE FL 32207

Title ED Title VP

Name HOLLEY, CAROLYN S Name TULLIS, JAMES

Address 1725 ART MUSEUM DRIVE Address 1665 SAN MARCO BLVD

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: JACKSONVILLE FL 32207

Title VP Title SECRETARY

Name DICKINSON, GARY R. Name ANDERSON, JAMES

Address 1725 ART MUSEUM DRIVE Address 1725 ART MUSEUM DRIVE
City-State-Zip: JACKSONVILLE FL 32207
City-State-Zip: JACKSONVILLE FL 32207

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: CAROLYN S HOLLEY

ED

02/09/2017