

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705467

Entity Name: NEW HEIGHTS OF NORTHEAST FLORIDA, INC.**Current Principal Place of Business:**3311 BEACH BLVD
JACKSONVILLE, FL 32207**Current Mailing Address:**3311 BEACH BLVD
JACKSONVILLE, FL 32207**FEI Number:** 59-0718304**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DRISCOLL, SUSAN
3311 BEACH BLVD.
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:** SUSAN DRISCOLL

04/16/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name AKERS, JAMES E
Address 3311 BEACH BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title CEO
Name DRISCOLL, SUSAN
Address 3311 BEACH BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name GESDORF, WILLIAM
Address 3311 BEACH BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title VC
Name SAWYER, BRYAN
Address 3311 BEACH BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title SECRETARY
Name ABNER, MICHELLE
Address 3311 BEACH BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title TREASURER
Name WEAVER, JOEL
Address 3311 BEACH BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title CHAIRMAN
Name FISHBURNE, JOHN I III
Address 3311 BEACH BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name QUACKENBUSH, DAVID
Address 3311 BEACH BLVD
City-State-Zip: JACKSONVILLE FL 32207

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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: SUSAN DRISCOLL

PRESIDENT/CEO

04/16/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LAWLOR, AMY
Address	3311 BEACH BLVD
City-State-Zip:	JACKSONVILLE FL 32207