

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713023

Entity Name: SOUTHERN GENEALOGIST'S EXCHANGE SOCIETY, INC.

Current Principal Place of Business:

6215 SAUTERNE DR
JACKSONVILLE, FL 32210

Current Mailing Address:

P O BOX 7728
JACKSONVILLE, FL 32238-7728 US

FEI Number: 59-6215576

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRIBANIC, GEORGIA
4492 SAN LORENZO BLVD
JACKSONVILLE, FL 32224 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: GARRY C. CLAY

04/19/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MASTERS, ALANA
Address 11447 PANTHER CREEK PKWY
City-State-Zip: JACKSONVILLE FL 32221

Title HISTORIAN
Name PRIBANIC, GEORGIA
Address 4492 SAN LORENZO BOULEVARD
City-State-Zip: JACKSONVILLE FL 32224

Title CORRESPONDENCE SECRETARY
Name HOWLE, MARY JEANETTE
Address 5802 MANNING CEMETERY
City-State-Zip: JACKSONVILLE FL 32259

Title TREASURER
Name APONTE, LUIS
Address 12527 WESTBERRY HIDEWAY
City-State-Zip: JACKSONVILLE FL 32223

Title RECORDING SECRETARY
Name HAKALA, JOAN
Address 1478 MANDARIN POINT LANE SOUTH
City-State-Zip: JACKSONVILLE FL 32223

Title VP
Name WALL, RACHEL LYNN
Address 14567 MILLHOPPER ROAD
City-State-Zip: JACKSONVILLE FL 32258

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: ALANA MASTERS

PRESIDENT

04/19/2025

Electronic Signature of Signing Officer/Director Detail

Date