

2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 716413

Entity Name: BIG BROTHERS BIG SISTERS OF NORTHEAST FLORIDA, INC.

FILED
Aug 06, 2019
Secretary of State
7226643960CC

Current Principal Place of Business:

40 EAST ADAMS STREET
SUITE 220
JACKSONVILLE, FL 32202

Current Mailing Address:

40 EAST ADAMS STREET
SUITE 220
JACKSONVILLE, FL 32202 US

FEI Number: 59-0683256

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOLOMON, JULIE
40 EAST ADAMS STREET
SUITE 220
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: JULIE SOLOMON

08/06/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PAST BOARD CHAIR 18-19
Name SPENCER, JASON
Address ONE INDEPENDENT DRIVER
25TH FLOOR
City-State-Zip: JACKSONVILLE FL 32202

Title BOARD MEMBER, 18/19
Name HELDENBRAND, JONATHAN
Address 1 SLEIMAN PARKWAY
City-State-Zip: JACKSONVILLE FL 32216

Title BOARD MEMNER 18-19
Name FERRY, BILL
Address 4600 TOUCHTON ROAD E, BUILDING
1
City-State-Zip: JACKSONVILLE FL 32246

Title VICE PRESIDENT OF FINANCE
Name SOLOMON, JULIE
Address 40 EAST ADAMS STREET
SUITE 220
City-State-Zip: JACKSONVILLE FL 32202

Title CEO
Name ALFORD, SARA
Address 40 EAST ADAMS STREET
220
City-State-Zip: JACKSONVILLE FL 32202

Title PAST BOARD MEMBER 18-19
Name ARMBRUST, STEVEN
Address 500 WATER STREET
MAIL CODE: J-150
City-State-Zip: JACKSONVILLE FL 32202

Title BOARD MEMBER
Name DUNHAM, RICK
Address 76 SOUTH LAURA STREET
SUITE 202
City-State-Zip: JACKSONVILLE FL 32202

Title BOARD MEMBER
Name JOHNSON, JAYNAE
Address 10752 DEERWOOD PARK BLVD. S
SUITE 110
City-State-Zip: JACKSONVILLE FL 32256

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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: JULIE SOLOMON

VP OF FINANCE

08/06/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHAIRMAN OF THE BOARD, 19-20
Name LEWIS, DERRICK
Address 501 EAST BAY STREET
City-State-Zip: JACKSONVILLE FL 32202

Title VICE CHAIRMAN OF THE BOARD
Name SCHUCHMANN, JOEL
Address 112 PGA BOULEVARD
City-State-Zip: PONTE VEDRA BEACH FL 32250

Title BOARD MEMBER
Name WINBUSH, WYMAN
Address 11704 SEAVIEW DRIVE
City-State-Zip: JACKSONVILLE FL 32225

Title BOARD MEMBER
Name FRANCIS, SHALISA
Address 3670 HARTSFIELD FOREST CIRCLE
City-State-Zip: JACKSONVILLE FL 32277

Title BOARD MEMBER, 18/19
Name RILEY, SHERMAN
Address 7500 CENTURION PARKWAY
City-State-Zip: JACKSONVILLE FL 32256

Title SECRETARY
Name UMUNNA, OBI
Address 3740 STAINT JOHNS BLUFF S
UNIT 9
City-State-Zip: JACKSONVILLE FL 32224

Title BOARD MEMBER
Name INMAN , SAM
Address 40 EAST ADAMS STREET
SUITE 220
City-State-Zip: JACKSONVILLE FL 32202

Title TREASURER
Name KUBLBOCK, JOHN
Address 96109 MARSH LAKES DRIVE
City-State-Zip: FERNANIDINA BEACH FL 32034