2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732847

Entity Name: THE CFA SOCIETY OF JACKSONVILLE, INC.

FILED Mar 06, 2018 **Secretary of State** CC1843386641

Current Principal Place of Business:

1579 THE GREENS WAY

SUITE 20

JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

1579 THE GREENS WAY SUITE 20

JACKSONVILLE BEACH, FL 32250

FEI Number: 59-1606008 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JANOCKO, JOSEPH T 4900 DEERWOOD CAMPUS PKWY JACKSONVILLE, FL 32256 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

PRESIDENT Title Title DIRECTOR

Name JANOCKO, JOSEPH T Name FURFINE, DAVID A

Address 4800 DEERWOOD CAMPUS PKWY Address 1579 THE GREENS WAY

SUITE 20

City-State-Zip: JACKSONVILLE FL 32246 JACKSONVILLE BEACH FL 32250 City-State-Zip:

Title DIRECTOR

Title **DIRECTOR** KAVALIEROS, DIMITRI Name Name

GREIVE, PATRICK Address 50 N. LAURA ST.

C/O 1579 THE GREENS WAY Address **SUITE 3700**

City-State-Zip: JACKSONVILLE BEACH FL 32250 City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR **DIRECTOR** Title

PATSY, RICHARD Name BERNARDO, JEFF Name

C/O 1579 THE GREENS WAY Address Address C/O 1579 THE GREENS WAY

SUITE 20

City-State-Zip: JACKSONVILLE BEACH FL 32250 City-State-Zip: JACKSONVILLE BEACH FL 32250

Title **DIRECTOR**

Title TREASURER, DIRECTOR Name CORNELL, AUSTEN

Name DAVID, SIEGEL Address C/O 1579 THE GREENS WAY

1579 THE GREENS WAY Address SUITE 20 SUITE 20

JACKSONVILLE BEACH FL 32250 City-State-Zip:

City-State-Zip: JACKSONVILLE BEACH FL 32250

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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.

03/06/2018 SIGNATURE: DAVID SIEGEL TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name MILENA, SPASOVA

Address 1579 THE GREENS WAY

SUITE 20

City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR

Name JULE, BESSENT

Address 1579 THE GREENS WAY

SUITE 20

City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR
Name ANNA, TSOY

Address 1579 THE GREENS WAY

SUITE 20

City-State-Zip: JACKSONVILLE BEACH FL 32250