

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733409

Entity Name: SALAAM CLUB OF FLORIDA, INC.**Current Principal Place of Business:**8101 BEACH BLVD.
JACKSONVILLE, FL 32216**Current Mailing Address:**8101 BEACH BLVD.
JACKSONVILLE, FL 32216**FEI Number:** 59-6168976**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MAYNOR, KIMBERLY
8101 BEACH BLVD.
JACKSONVILLE, FL 32216 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:** KIMBERLY MAYNOR

03/06/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	MAYNOR, KIMBERLY
Address	8101 BEACH BLVD.
City-State-Zip:	JACKSONVILLE FL 32216

Title	RECORDING SECRETARY
Name	ACKMAN, JOANNE
Address	8101 BEACH BLVD.
City-State-Zip:	JACKSONVILLE FL 32216

Title	PRESIDENT
Name	MEYERS, CYNTHIA
Address	8101 BEACH BLVD.
City-State-Zip:	JACKSONVILLE FL 32216

Title	FINANCIAL SECRETARY
Name	MASHOUR, MARY
Address	8104 MONTASONTA AVE
City-State-Zip:	JACKSONVILLE FL 32211

Title	VP
Name	MAIDA, KEITH
Address	8101 BEACH BLVD.
City-State-Zip:	JACKSONVILLE FL 32216

Title	CHAIRMAN
Name	WILLIAMS, KATHY
Address	8101 BEACH BLVD.
City-State-Zip:	JACKSONVILLE FL 32216

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: KIMBERLY MAYNOR

TREASURER

03/06/2019

Electronic Signature of Signing Officer/Director Detail

Date