

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746868

Entity Name: ST. JOHNS COUNTY AUDUBON SOCIETY, INC.**Current Principal Place of Business:**27 FISHERMANS COVE RD.
PONTE VEDRA BEACH, FL 32082**Current Mailing Address:**27 FISHERMANS COVE RD.
PONTE VEDRA BEACH, FL 32082 US**FEI Number:** 59-3329771**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**KOCH, AMY S
27 FISHERMANS COVE RD.
PONTE VEDRA BEACH, FL 32082 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:** AMY S. KOCH

02/22/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	BRENNER, MARCY
Address	16 MAY ST.
City-State-Zip:	ST. AUGUSTINE FL 32080

Title	VP, SECRETARY
Name	CONTE, MARY
Address	115 TIDECREST PKWAY #3201
City-State-Zip:	PONTE VEDRA BEACH FL 32081

Title	DIRECTOR
Name	CUSICK, DEBBIE
Address	434 HARVEST BEND DR
City-State-Zip:	ORANGE PARK FL 32003

Title	PRESIDENT
Name	KOCH, AMY S
Address	27 FISHERMANS COVE RD.
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	TREASURER
Name	BUREK, LINDA
Address	206 MEDIO DR.
City-State-Zip:	ST. AUGUSTINE FL 32095

Title	DIRECTOR
Name	GILL, PATRICIA
Address	218 B ST
City-State-Zip:	ST. AUGUSTINE BEACH FL 32080

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: AMY S. KOCH

PRESIDENT

02/22/2019

Electronic Signature of Signing Officer/Director Detail

Date