## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 754878** 

Entity Name: JACKSONVILLE REGIONAL CHAMBER OF COMMERCE, INC.

FILED
Apr 14, 2016
Secretary of State
CC2329398781

## **Current Principal Place of Business:**

3 INDEPENDENT DRIVE JACKSONVILLE, FL 32202

## **Current Mailing Address:**

3 INDEPENDENT DRIVE JACKSONVILLE, FL 32202 US

FEI Number: 59-0306160 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DAVIS, DANIEL 3 INDEPENDENT DRIVE 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: DANIEL DAVIS 04/14/2016

Electronic Signature of Registered Agent

Officer/Director Detail:

Title P, D Title CHAIRMAN

Name DAVIS, DANIEL Name MORAN, AUDREY

Address 3 INDEPENDENT DRIVE Address 841 PRUDENTIAL DRIVE, SUITE 1300

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32207

TitleDIRECTORTitleDIRECTOR, TREASURERNameDELANEY, JOHNNameBUCKLAND, DEBBIEAddress1 UNF DRIVEAddress200 W. FORSYTH ST.

City-State-Zip: JACKSONVILLE FL 32224

City-State-Zip: JACKSONVILLE FL 32224 City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR Title DIRECTOR

Name SMITH, DARNELL Name JOHNSTON, BARBARA

Address 4800 DEERWOOD CAMPUS PKWY Address 1 INDEPENDENT DRIVE

City-State-Zip: JACKSONVILLE FL 32246 114

City-State-Zip: JACKSONVILLE FL 32202

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: DANIEL DAVIS PRESIDENT 04/14/2016

Date