2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766251

Entity Name: NORTHEAST FLORIDA LEAGUE OF CITIES, INC.

FILED Apr 22, 2022 **Secretary of State** 8055595550CC

Date

Current Principal Place of Business:

102 CANAL DRIVE

EAST PALATKA, FL 32131

Current Mailing Address:

PO BOX 262

PALATKA, FL 32178-0262 US

FEI Number: 59-2560639 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JORDAN, BETSY MS. 102 CANAL DRIVE

EAST PALATKA, FL 32131 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: BETSY JORDAN 04/22/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title SECRETARY/TREASURER

DAVIS, LOUIE MARTIN, DALE Name Name P.O. DRAWER B Address 204 ASH STREET Address

City-State-Zip: FERNANDINA BEACH FL 32034 WALDO FL 32694 City-State-Zip:

Title D Title **PRESIDENT**

Name BOROM, RUFUS Name NUGENT, DANNY Address 201 N. 2ND STREET Address 209 NORTH THOMPSON STREET PALATKA FL 32177 City-State-Zip: City-State-Zip: STARKE FL 32091

Title Title D

Name BROWN, TONY **DEVILLE. THOMAS** Name

Address 555 S. LAWRENCE BLVD. PO BOX 1041 Address

City-State-Zip: KEYSTONE HEIGHTS FL 32656 City-State-Zip: PENNEY FARMS FL 32079

Title Title DIRECTOR

Name HENLEY, EDDIE SIRMONES, FRED Name 2042 PARK AVENUE Address 200 SW 1ST STREET Address

City-State-Zip: ORANGE PARK FL 32073 City-State-Zip: LAKE BUTLER FL 32054

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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.

SECRETARY/TREASURER 04/22/2022 SIGNATURE: DALE MARTIN

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D Title D

Name HILL, JAKE Name LYNCH, SEAN

Address 205 N.MARION AVENUE Address 10 US HIGHWAY 90 W
City-State-Zip: LAKE CITY FL 32055 City-State-Zip: BALDWIN FL 32234

Title D Title D

NameMYERS, MICHELENameBUTLER, CONNIEAddress3 SUMMIT STREETAddress321 WALNUT STREET

City-State-Zip: CRESCENT CITY FL 32212 City-State-Zip: GREEN COVE SPRINGS FL 32043