

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000088

Entity Name: THE FIRST COAST LEADERSHIP FOUNDATION
JACKSONVILLE, INC.**FILED**
Mar 17, 2020
Secretary of State
0642002458CC**Current Principal Place of Business:**2049 NORTH PEARL STREET
JACKSONVILLE, FL 32206**Current Mailing Address:**2049 NORTH PEARL STREET
JACKSONVILLE, FL 32206 US**FEI Number: 59-3694394****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GUNDY, REGINALD L
2049 NORTH PEARL STREET, STE B
JACKSONVILLE, FL 32206 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 :

Title CEO/PRESIDENT
Name GUNDY, REGINALD
Address 2783 ARMSDALE ROAD
City-State-Zip: JACKSONVILLE FL 32218

Title S
Name KILCREASE, BESS
Address 2049 N. PEARL STREET
City-State-Zip: JACKSONVILLE FL 32206

Title D
Name MCGHEE, CARLOS SR
Address 6522 BARTH RD
City-State-Zip: JACKSONVILLE FL 32219

Title CHAIRMAN
Name LEVY, PETER
Address 2049 NORTH PEARL STREET
City-State-Zip: JACKSONVILLE FL 32206

Title DIRECTOR
Name WEST, JERRY
Address 2049 NORTH PEARL STREET
City-State-Zip: JACKSONVILLE FL 32206

Title TREASURER
Name VANZEE, LAURA
Address 2049 NORTH PEARL STREET
City-State-Zip: JACKSONVILLE FL 32206

Title DIRECTOR
Name SANDERS, LAVERN
Address 2049 NORTH PEARL STREET
City-State-Zip: JACKSONVILLE FL 32206

Title VP
Name NICKS, NASHANE
Address 2049 NORTH PEARL STREET
City-State-Zip: JACKSONVILLE FL 32206

Continues on page 2

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: REGINALD L GUNDY**PRESIDENT/CEO****03/17/2020**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	OLAPADE, SOLOMON
Address	2049 NORTH PEARL STREET
City-State-Zip:	JACKSONVILLE FL 32206