

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000008545

**FILED  
Jan 10, 2017  
Secretary of State  
CC7369726738**

**Entity Name:** THE CHILDREN'S FOUNDATION OF THE EXCHANGE CLUB OF THE JACKSONVILLE BEACHES, INC.

**Current Principal Place of Business:**

427 3RD ST N  
JACKSONVILLE, FL 32250

**Current Mailing Address:**

427 3RD ST N  
JACKSONVILLE, FL 32250

**FEI Number: 30-0027682**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HILLEGASS, WILLIAM G  
427 3RD ST N  
JACKSONVILLE, FL 32250 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           PRESIDENT  
Name           BAUER, STEVEN  
Address        SWIMMING SALMON PLACE S.  
City-State-Zip: JACKSONVILLE FL 32225

Title           PAST PRESIDENT  
Name           BASS, BOB  
Address        BOCA GRANDE AVE  
City-State-Zip: ATLANTIC BEACH FL 32233

Title           S  
Name           MULLINS, JOHN  
Address        OAKWOOD ROAD  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title           T  
Name           HOBBS, HURSCHEL  
Address        3RD STREET  
City-State-Zip: NEPTUNE BEACH FL 32266

*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: STEVEN BAUER**

**P**

**01/10/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date