## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000553

Entity Name: FRIENDS OF NASSAU, INC.

Current Principal Place of Business:

960185 GATEWAY BLVD., STE. 104 FERNANDINA BEACH. FL 32034

**Current Mailing Address:** 

P. O. BOX 15941

FERNANDINA BCH, FL 32035 US

FEI Number: 20-0328667 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, CLYDE W 960185 GATEWAY BLVD, STE. 104 FERNANDINA BEACH, FL 32034 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

Date

FILED Mar 18, 2015

**Secretary of State** 

CC7083217590

Officer/Director Detail:

Title D Title

NameKELLEY, STEPHEN WNameLAPORTE, PIERREAddressP. O. BOX 521Address2398 SADLER ROAD

City-State-Zip: FERNANDINA BCH FL 32035 City-State-Zip: FERNANDINA BCH FL 32034

Title P Title D

Name MALOY, FOY Name USERY, MELVIN
Address P. O. BOX 16874 Address P.O. BOX 15357

City-State-Zip: FERNANDINA BCH FL 32035 City-State-Zip: FERNANDINA BEACH FL 32035

Title VP Title S

Electronic Signature of Signing Officer/Director Detail

Name DREW, JOHN M Name HARDING, KIM

Address 86130 LICENSE ROAD Address 95059 VENTURES CT.

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

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: PIERRE LAPORTE TREASURER 03/18/2015