

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009585

Entity Name: PLANNED GIVING COUNCIL OF NORTHEAST FLORIDA, INC.**Current Principal Place of Business:**1910 SAN MARCO BLVD
JACKSONVILLE, FL 32207**Current Mailing Address:**1910 SAN MARCO BLVD
JACKSONVILLE, FL 32207 US**FEI Number: 56-2662173****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**COKER, JEAN CESQ.
6622 SOUTHPOINT DR. SOUTH, SUITE 160
JACKSONVILLE, FL 32216-0998 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 DIRECTOR, TREASURER
Name THOMPSON, KENNETH
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name MICHELLE, ADAMS
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name MICHAEL, ELIAS
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name YOUNT, TANIA
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name BUSH, OLIVIA
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name GOVAN, KIMBERLY
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name BRODEUR, MARIETTE
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR, PRESIDENT
Name KETCHUM, TERI
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

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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.

SIGNATURE: KENNETH THOMPSON**DIRECTOR, TREASURER 01/13/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MUELLER, RACHEL
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR, SECRETARY
Name CULVER, JACKIE
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name COGNETTA, DAVE
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name KIFER, JENNIFER
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name SMITH, KELLIE
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name MARSHALL, CANDACE
Address 1910 SAN MARCO BLVD
City-State-Zip: JACKSONVILLE FL 32207